



INDIAN NATIONAL CARTOGRAPHIC ASSOCIATION

APPLICATION FORM FOR MEMBERSHIP

(FILL THE FORM ONLY IN BLOCK LETTER)

Name Mr./Ms.....Date of Birth.....

Qualifications.....

Position held..... *Grade of membership applied.....
(See reverse for details)

Present Address..... Permanent Address.....

.....

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City.....Pin Code..... City.....Pin Code.....

State:-..... State:-.....

Phone No. Phone No.

Email:-..... Mobile No.:-.....

Experience/Papers presented (if space is inadequate an additional sheet may be attached).

Details of payment (**Bank Draft** may be drawn in the name of INCA on any Bank at Hyderabad. **No outstation cheque allowed**).

Amount	Mode	Details of Draft	Remarks
Rs.....	Cash/Draft.....

I hereby declare that the foregoing is a full and correct statement to the best of my knowledge and belief.

Date.....

Place..... Signature of Applicant

Proposed by..... Membership No.....

Date..... Signature of Proposer

Mailing Address – Secretary General, INCA, Room No.234, Second Floor, AP GDC Block, Survey of India, Uppal, Hyderabad-500039. Phone & Fax: 040-27202217

email: secretarygeneralinca935@gmail.com

Website: <http://www.incaindia.org>

*Categories of Membership and Rates of fees payable:

Institutional Life Member

Rs. 25,000/- + GST@18% = Rs. 29,500/-

Life Member

Rs. 2,000/- + GST@18% = Rs. 2360/-payable

For Office Use

Rs.....Receipt No. & Date.....

Admitted as.....Member.

Membership No.....

Date of Admission.....

Treasurer

Secretary General, INCA