



INDIAN COUNCIL OF ARBITRATION

(Registered under the Societies Registration Act, 1860)

Federation House, Tansen Marg, New Delhi-110001.

Tel: 23487426, 23719103, 23319849 Fax: (91) 11 23320714, 23721504

Website: www.icaindia.co.in Email: membership.ica@ficci.com and ica@ficci.com

APPLICATION FORM FOR ASSOCIATE/ INDIVIDUAL MEMBERSHIP

Category of Membership:

Individual Member Life Individual Member

Full Name: Mr./Ms/ _____ (in Block letters)

Address: _____
_____ Pin _____

Occupation: _____
Phone/s: (Office) _____ (Resi.) _____ Fax: _____
Email: _____ Mobile: _____
Date of Birth: _____ Age: _____ Nationality: _____
Father's/Husband's Name: _____
(Please attach supporting documents for the purpose of office records)

Educational/Professional Qualifications (Graduation onwards):
Name and Address of College/Institution _____ University _____ Year of Passing _____

(Please attach supporting documents for the purpose of office records)
Experience:
Employers' Name _____ Address _____ Position _____ Period _____
From _____ To _____

Members of the following:
Organisations _____ Position _____ Period _____
From _____ To _____

Are you already a Member (Annual Basis):

Fields of Specialization:

Please tick (√) your experience or knowledge:

Agency & Distribution and Franchising Engineering/Technical Intellectual Property Joint Ventures Real Estate Power Energy
State Contracts Aviation International Investments Finance Banking Maritime Shipping Commercial Contracts Telecommunications
 Construction Insurance /Information Technology Oil, Petroleum and Gas Securities Steel, Mining & Quarrying Corporation & related
activities Agriculture & Food Processing Hotel & Tourism Industry Automobile Entertainment Corporate Law /Environment
 Taxation Transport Textile/Jute Industry Computer Software Other Areas Specialisation & Knowledge of any other
field: _____

Arbitration:

Course Name	Organizer's Name	Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

Arbitration:

As Arbitrator

Number of Cases as a Sole/Co-Arbitrator:
Number of Cases as a Counsel/Expert witness:

Field(s) of arbitration:

Name of Seminars/Conferences participated:

Addressed

Participated

Title of Paper presented (Enclose a set of Paper)

Whether willing to contribute or make presentation in Conference on ADR or for ICA Arbitration Quarterly

Existing Membership of Chamber/any Association (*This information is vital*).

I am a member of _____

Sponsorship (Optional) by: ICA Member/Local Chamber/Bank Manager

Name: _____

Signature & Stamp: _____

Designation: _____

IN CASE OF APPLICATION FOR ASSOCIATE MEMBERSHIP, PROVIDE THE FOLLOWING INFORMATION:

Category of Membership:

Associate Member Permanent Associate Member

Name of the Company/Firm _____

Name of the Chief Executive: _____

Designation: _____

Address: _____

City _____ Pin _____

Phone/s: (Office) _____ Direct _____

Fax: _____ Email: _____

We are engaged in Trading /Manufacturing /Construction /Hotel /Information Technology / Investment /Leasing /Hire Purchase /Banking /Merchant Banking /Portfolio Management / NBFC's /Insurance /Marketing /Brokering /Safe Deposit / Travel Agency / Transport / Printing and Publishing /Cold Storage / Research /Consultancy /Management / Training / Auditing /Legal Firm /Institutional / Commission Agency /Agency Business

Main Line of Business:.....

Latest Turnover in the Year.....Rs.....

We are a Manufacturer /Merchant exporter and have the status of an Export House /Trading House /Star Trading House / Super Star Trading House /E.O.U. /E.P.Z.

Export Turnover: \$.....Year.....

Major Export Markets.....

No. of Employees (Approx.).....Year of Establishment.....

Location of Major Factories.....

Attach copy of Articles of Association/Memorandum of Association/Partnership Deed in case of Companies/Firms & latest financial Accounts including Balance Sheet.

I agree to abide by the Memorandum and Articles of Association and the Rules of the ICA. I am sending herewith a Cheque/Demand Draft payable at Delhi in favour of 'Indian Council of Arbitration' bearing No. _____ for *Rs. _____ being annual subscription/Permanent Associate/Life Individual Membership Subscription including one time Admission fee and GST @ 18%

Yours truly,

Date

Signature of the Applicant
Name and Designation

Rates of Subscription:

One time admission fee and 18% GST will be charged extra on every payment and each category with effect from 1st July, 2017.

I. Associate Membership: (For Companies, Firms) Rs.2,950/- per year

(a) Annual - Rs.2,500/- +500 One time admission fee = Rs.3,000+ GST Rs.540 = Total Rs.3,540/-

(b) Permanent - 12 times the annual subscription in lumpsum Rs.30,000+500+GST Rs. 5,490 = Total Rs.35,990/-

II. Individual Membership: (For Individuals) Rs.1,180/- per annum

(a) Annual -Rs.1,000/- per annum+Rs.300+234 = Total Rs.1,534/-

(b) Life:- below 60 years of age- Rs.1000x12= Rs.12,000+300+2214 GST = Total Rs.14,514/-

Life:- above 60 years of age- Rs.1000x6 = Rs. 6,000+300+1134 GST = Total Rs. 7,434/-

(c) **Life Individual Membership fee in lump sum (Foreign Nationals) US \$600 + one time admission fee of US \$ 100 = Total US\$700**

(d) Please provide copies of PAN Card, Aadhaar Card and two passport size photographs.

Note: The period for Annual subscription is from 1st April to 31st March. Those applying after 1st October of the year need to pay only half the annual subscription.

For further details, please refer to the Rules and Regulations of the Council (Rules 3 to 8)