

Application form for Senior Citizen Membership (People over the age of 65 yrs)

Institute name: _____

Institute Address: _____

Details of Member

Name of Member: Mr./Mrs./Dr./Prof./ Other (please specify) _____

Occupation: _____ Nature of Activities _____

Phone Landline (work): _____ Phone (home): _____

Phone Mobile: _____ Fax: _____

E Mail ID: _____

Date of Birth (DD/MM/YYYY): _____

Education - (Please specify all degrees with year of passing out and name of institution)

Degree	Name of Institution	Year of Passing

Nationality _____

Marital Status: Married Single

PAN Number: _____

Home Address: _____

City _____ PIN _____

Hobbies & Interests: _____

Other Club Memberships ; _____

Spouse Name ; _____

Children's names and Date of Birth: _____

As a Senior Citizen Membership, I agree to comply with and be bound by the Bye-Laws, Rules and Regulation of the IITAIIC , as may be in force from time to time. I also wish to confirm and hereby declare that the information given above is true and correct in all respects and agree to the terms and conditions set out in this Application Form for Senior Citizen Membership of IITAIIC.

Signature of Member

ENDORSEMENT OF APPLICANT AS AN ALUMNUS OF THE INSTITUTE

We hereby declare that the applicant was an alumnus of the institute during years _____

Name and Signature of Authorized Signatory of the Institute (Chennai Chapter)

Or

Attach a copy of your Degree/Diploma Certificate

The Membership is eligible for people over the age of 65 years.

Payment must made by cheque favouring "IIT Alumni Industry Interaction Center" within 30 days of Invoice date

NEFT:CanaraBank, IITMadrasBranch, A/C-2722101007699, IFSC Code-CNRB0002722

In the event of defaults in payment by the member beyond 90 days of date of Invoice, usage of the facilities of the Center would be suspended