



# INDIAN LEATHER TECHNOLOGISTS' ASSOCIATION

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## APPLICATION FORM FOR MEMBERSHIP

Application for :  Life Membership  Ordinary Membership  Honorary Membership  
 Associate Membership  Institutional Membership

Name of the Applicant:  
(BLOCK LETTERS) .....

Father's Name: .....

Date of Birth: .....

Blood Group: .....

Present Address: .....

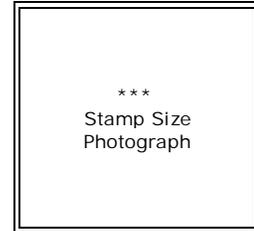
Permanent Address: .....

Office Phone No.: .....

Residence Phone no.: .....

Mobile Phone No.: .....

Email Address: .....



**Educational Qualification	**Professional Experience	Extra curricula activities	Specialization in the field of

Date..... Signature of the applicant

**\*Proposed by:** **\*Seconded by :**

Name..... Name.....

Address..... Address.....

Signature..... Signature.....

### Observation of Membership Committee:

Approved :

Remarks : Signed by :

Approved under E.C. No.:

\_\_\_\_\_  
General Secretary

- \* Proposer and Seconder must be a Member of ILTA
- \*\* Copies of the certificates both for Educational qualification and Professional experience duly attested by a member of the Association or by a Gazetted officer.
- \*\*\* 2 copies of stamp size photographs Should be enclosed with application Form.
- \*\*\*\* A Separate sheet may be used for Qualification / Experience / Vocational activities etc. if it requires more space.

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