

MEMBERSHIP FORM

Nature of Applicant: IFA Regional/National Distributor Bank IFA Association Others _____

Status: Individual HUF Firm Private Co. Public Co. Trust Society/AoP/Bol Others _____

Full Name: _____

Date of Birth: Date of Registration: PAN:

Correspondence Address: _____

_____ City: _____

Pin/Zip Code: State: Country:

Membership Details:

Nature / Type	Eligibility	One Time Enrolment Fees	Yearly Membership Renewal Fees
Charter Member	Corporate / Non-corporate entities from distribution / advisor community	Rs. 5,00,000	Rs. 50,000
Associate Member	IFA Associations	Rs. 25,000	Rs. 2,500

Type of Membership Requested: Charter Member Associate Member

DD/Cheque in favour of " FINANCIAL INTERMEDIARIES ASSOCIATION OF INDIA" payable at Mumbai.

Name of Contact Person: _____

Business Phone: Fax: Mobile:

E-mail: _____

Home Address: _____

_____ City: _____

Pin/Zip Code: State: Country:

Date of Incorporation (in case of Pvt/Public Ltd Company):

1. Education Details:

Degrees: _____ Year: _____ Educational Institution(s): _____

2. Professional Designations:

Certifications/Designations: _____ Year: _____ Awarding Organization(s): _____

3. List Relevant professional association/industry/community service and position held:

Service/Position(s): _____ Date(s): _____ Reference(s): _____

Clearly describe areas of particular national or international leadership or prominence in your background.

Please state briefly your general qualifications that will allow you to contribute to the Vision & Mission of FIAI

Please state briefly your specific qualifications to serve on FIAI

4. Disclosure of Complaints / Litigation Current and Past

Are you/your organization, have ever been, under notice for any complaints by clients or any regulatory / government agency which have led or may lead to legal or disciplinary action or is there any outstanding / pending litigation (anytime during the last three years) against you/your organization?

Complaints:

Currently

Have been

No

If you are currently under notice or you have been in the past, please briefly explain:

If there is any outstanding/pending litigation, please briefly explain:



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I/We hereby declare that the information provided above is correct and nothing material has been concealed therefrom.
Further, I /We hereby declare that I/We shall abide by the regulations of FIAI as mentioned in its Articles of Association.

Name of the Authorised Signatory with Designation:

Signature: _____
(Please affix Rubber Stamp, if any)

Recommended by: _____

Signature: _____

Member _____

Date: _____

Place : _____

ACKNOWLEDGMENT SLIP

Received subject to realisation, verification and conditions, an application for membership as mentioned in the application form.

Form No. _____

Cheque No.	Date	Amount	Category



QUESTIONNAIRE

Q. 1. What major challenges will be faced by FIAI in the long term, and how would you like to address them?

Q. 2. How do you intend to balance serving as Member with your existing professional obligations?

Q. 3. What traits, skills or experience do you possess that would allow you to be successful in the capacity of a Member of FIAI?

Q. 4. What major challenges will be faced by FIAI in the long term, and how would you like to address them?

Q. 5. What new initiative should FIAI Consider?

Q. 6. What is your vision for the future of FIAI (in India)?

