



Business Process Industry Association of India

Membership Form

Correspondence Address

Business Process Industry Association of India
c/o Confederation of Indian Industry
249 F, Phase – IV
Udyog Vihar, Sector – 18
Gurgaon - 122 015
Haryana, India.

Tel: 0124 4101041(D)/4014060-67
Fax: 0124 4014080
Email: bpiai@ciionline.org

We request you to enroll us as members of the association (tick the appropriate box)

- Member Affiliate Member

(Please fill in Block Letters)

1. Name of the Organisation / Company:.....

2. Name and Designation of Chief Executive:.....

3. Address:.....

(If you have other offices in India / abroad, please attach their complete address)

Tel:..... Mob:..... Fax:.....
Email:..... Website:

4. Name and Designation of Senior Management representative for liaison with BPIAI.....

Tel:..... Mob..... Fax:.....
Email:.....

5. In what areas would you require the association to Help / Support? (Attach Separate sheet, if required)

6. Company / Organisation Data (Please tick appropriate box)

(i) Type Voice Based Process Center Non-Voice Based Process Center

Service Provider / Vendor Consultant

(ii) Business Domestic International* Both*

* Mention Countries:.....

(iii) Number of Seats: (For Call Centers / BPO's).....

(iv) Type of Service: (For Service Providers).....

(v) Consultancy Fields: (For Consultants).....

(vi) Turnover In Rs. (Last two years): Year.....Rs. Year..... Rs

(vii) DoT **Licence Number**:.....
(viii) Company **Registration Number**:

7. Payment Details

Our cheque /DD No.:..... dated for Rs.....
Drawn on favoring "**Call Center Association of India**" payable at New Delhi is enclosed.

8. Following are enclosed:

- (i) Latest Annual Report / Balance Sheet
- (ii) Company Profile
- (iii) Note on your expectations from BPIAI (refer S.No. 5)
- (iv) DD / Cheque
- (v) Names and Designation of Key Management Personnel

9. We hereby give our consent to abide by the rules and regulations of the Association.

Signature: Name:.....

Date: Designation:.....

Office Stamp

=====

For Office use only

Proposed by: _____ Seconded by:

Name of the Member Company

Name of the Member Company

Admitted on _____ Membership No:

Secretary General

Chairman, Membership Committee

President / Vice President