

# Membership Application Form

**itSMF**

The IT Service Management Forum

To apply for membership, please complete this form and send it to:

**IT Service Management Forum (India),  
C/o Dr. Debabrata Das IIIT – Bangalore,  
26/C, Electronic City,  
Hosur Road,  
Bangalore - 560 100**

ALL CHEQUES TO BE CROSSED AND MADE PAYABLE TO "IT SERVICE MANAGEMENT FORUM (India)"

Web site: <http://www.itsmfindia.co.in>  
General Enquiry: [info@itsmfindia.co.in](mailto:info@itsmfindia.co.in)

## Type of Membership

Please tick appropriate box to indicate type of membership:

Tick	Category of Membership	1 year Fee (INR)	3 year Fee (INR)
	Individual - Student	INR 500	INR 1000
	Individual - Professional	INR 2000	INR 4000
	Individual - Associate	INR 15,000	INR 40,000
	Corporate 5	INR 20,000	INR 40,000
	Corporate 10	INR 35,000	INR 70,000
	Corporate Plus	INR 60,000	INR 120,000
	Vendor 1	INR 15,000	INR 30,000
	Vendor 5	INR 50,000	INR 100,000
	Vendor 10	INR 100,000	INR 200,000
	Vendor Plus	INR 200,000	INR 400,000
	Global Member	NIL	NIL

## Mode of payment

Cheque/DD	Cheque/DD No:	Bank:	Amount:
Credit Card	Card No:	Expiry: MM / YY	Amount:
Online	Reference no:	Bank:	Amount:

\_\_\_\_\_  
Name of Applicant & Company Stamp

\_\_\_\_\_  
Signature / Date

## Terms and Conditions

1. Payment must be made upon submission of application form.
2. itSMF India reserves the right to reject any application of membership.
3. itSMF India Memberships will not be fully activated until full payment is received. Therefore any applicable discount will be at itSMF discretion.
4. For Corporate and Vendor category: Only Registrations with company stamp and authorised signatory will be accepted.

## To be used by itSMF India

Date Received:		Membership Approved By:	
Membership Processed by:		Payment Received By:	
Term of Membership:		Membership No:	
Remarks:			

# Membership Application Form

## Membership Details

Please complete all details (Incomplete info will delay the processing of application)

### 1. Personal Particulars

Salutation Name Surname  
(in Block) \_\_\_\_\_

Passport No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ DD-MMM-YYYY Gender: Male Female

Nationality: Indian Others: Specify Country

Marital Status: Single Married

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Tel no: \_\_\_\_\_ Fax No: \_\_\_\_\_

Mobile no: \_\_\_\_\_ Email address: \_\_\_\_\_

Educational Qualifications: \_\_\_\_\_

### 2. Employment

Please indicate current employment status: Self-Employed Employed Student

Name of Employer /  
Company/Institute: \_\_\_\_\_

Position / Designation: \_\_\_\_\_

Office/Inst. Address: \_\_\_\_\_  
\_\_\_\_\_

Office/Inst. Tel no: \_\_\_\_\_ Office/Inst. Fax No: \_\_\_\_\_

Office/Inst. Email  
Address: \_\_\_\_\_

# Membership Application Form

### 3. Corporate/Associate & Vendor Membership Only

(Leave 1-2 blank if company nominee is to be nominated later)

Name of Company: \_\_\_\_\_

Office Address: \_\_\_\_\_  
\_\_\_\_\_

Office Tel no: \_\_\_\_\_

Office Fax No: \_\_\_\_\_

Nature of ITSM product/service: \_\_\_\_\_

Name of Authorized Company Official: \_\_\_\_\_

Position in Company: \_\_\_\_\_

Company Stamp / Seal : \_\_\_\_\_

### 4. Names of Other Nominees (Corporate & Vendor Membership)

No	Name	Designation	Contact No	Email Address
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

\* Please add in additional lines where required.