



Gujarat Chamber of Commerce & Industry

Shri Ambica Mills, Gujarat Chamber Building, Ashram Road, Ahmedabad 380009, Gujarat, India
☎ 079-26587992 📞 079-2658 2301/2/3/4 ✉ gcci@gujaratchamber.org 🌐 www.gujaratchamber.org

ASSOCIATION MEMBERSHIP FORM

Please fill all details in CAPITAL LETTERS ONLY. Tick the applicable box. Use only Blue/Black ink. *(Mandatory to be filled)

1. Membership Details*

(A) Name of Association _____
PAN No. _____ GST No. _____

(B) Location
Local* Outstation (Other than local)
*(*Having Business Address in the area falling within the limits of Ahmedabad District)*
(Please see no. 5 of Important Points)

(C) Phone No. _____

(D) E-mail ID _____

(E) Year of Establishment _____

(F) Total Number of Members _____
Number of Member Business Entities _____
Number of Member Association _____

(G) Type of Registration
a. Company b. Trust c. Society d. AOP f. Others

(H) Nature of Business of Member Entities (Please tick more than one, if applicable)
a. Manufacturer b. Trader c. Service Industry d. Professional

(I) Term of President and Office Bearers Starting _____ Valid upto _____

(J) Details of The Governing Body Tenure Starting _____ Valid upto _____

(K) Brief details about Association (Including Business Sector) _____

(L) Do you have own building?

Yes

No

If yes, then please submit the details

(M) Name of Current President _____

Mobile No. _____

Email _____

(N) Name of Hon. Secretary _____

Mobile No. _____

Email _____

(O) Name of other Current Office Bearers

Sr. No	Name	Designation	Mobile No.	E-mail ID	Website
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

(P) Details of Past Presidents of last 5 Years

Name	Mobile Number	Year
1.		
2.		
3.		
4.		
5.		

(Q) Name and Mobile number of Past Hon. Secretaries for last 5 Years

Name	Mobile Number	Year
1.		
2.		
3.		
4.		
5.		

(R) Name of Secretary General or Top Executive _____
(who is a current employee)

Mobile No: _____ **E-mail :** _____

(S) Major Activities carried out by Association

(T) Other activities carried out by your Association, Please specify

1. Seminar/ Webinar

2. Industrial Visit

3. Exhibition

(U) Do you have Business Women Wing/ Committee?

Yes

No

Do you have Youth Wing/ Committee?

Yes

No

Do you issue Certificate of Origin?

Yes

No

2. Business Details*

Registered Business Address

City: _____

Pin: _____

Phone/ Mobile: _____

Email ID: _____

Website: _____

Communication Address (if different):

City: _____

Pin: _____

Phone/ Mobile: _____

Email ID: _____

3. Details of Representatives*

REPRESENTATIVE 1
(Should be Current Office Bearer)

Title: **Mr./ Mrs./ Ms.**

Name: _____

(First) _____

(Middle) _____

(Surname) _____

Designation: _____

From: _____

To: _____

Mobile Number: _____

(R) _____

PAN No.: _____

Aadhar: _____

Email ID: _____

Date of Birth: _____

**Space for
Photograph**

(don't place
signature
on photograph,
don't staple the
photograph)

REPRESENTATIVE 2
(Should be Current Office Bearer)

Title: **Mr./ Mrs./ Ms.**

Name: _____

(First) _____

(Middle) _____

(Surname) _____

Designation: _____

From: _____

To: _____

Mobile Number: _____

(R) _____

PAN No.: _____

Aadhar: _____

Email ID: _____

Date of Birth: _____

**Space for
Photograph**

(don't place
signature
on photograph,
don't staple the
photograph)

4. Payment Details*

Date:

Amount:

Bank Name & Branch:

FOR ONLINE PAYMENT – UNIQUE TRANSACTION ID – (PLEASE ATTACH COPY OF THE RECEIPT DOWNLOADED)

(Please See No.8 of Important Points)

5. References*

Proposer

Name of Member

Membership Number _____

Name of Representative

Signature

Secunder

Name of Member

Membership Number _____

Name of Representative

Signature

Only existing voting members of GCCI can act as Proposer or Secunder. In case the Proposer or Secunder is a firm, company or association, only the representatives registered with GCCI can act as signatory.

• Whether your application for membership was rejected during last 2 years: Yes/ No

Declaration*

I/ We have gone through the Constitution and Regulations of Gujarat Chamber of Commerce & Industry and agree to abide the same.

Date: _____

Place: _____

Stamp:

Representative 1's Signature

Representative 2's Signature

Name:

Designation:

Name:

Designation:

FOR OFFICE USE ONLY

Application Received on:

Checked by Secretariat:

Date and Signature:

Approved/ Disapproved by Scrutiny Committee on:

Signatures of Members of Scrutiny Committee:

1.

2.

3.

4.

5.

6.

7.

8.

9.

Approved/ Disapproved by Executive Committee on:

Permanent Receipt No.

Membership No:

Receipt Sent on:

ID Cards Sent on:

Signature of Officer In-Charge:

Remarks:

Please attach documents as per the list given below and tick (✓) the appropriate box.
All Documents must be Signed & Sealed by the Applicant

A. Constitution of Business Association/ Mahajan

B. Certified Membership List

C. Authorization for Nomination of Representatives

D. GST Registration Certificate

E. Copy of Registration of Mahajan/ Association

F. Details of Associated Trade/ Industry

G. Names & Address of President/ Secretary & other Office Bearers

H. Location Details of Mahajan/ Association

I. Details of other Associations/ Chambers
where the applicant Mahajan/ Association is a member

Important Points

Important points to be kept in mind by the applicant at the time of filling up the application form for GCCI Membership

1. The applicant should fill the form in clear and legible writing.
2. Please provide the proof of registered business address.
3. Forms which are partly filled will not be accepted.
4. The Executive Committee reserves the right to cancel the membership of any member whose details are found to be incorrect at a later stage. The Executive Committee has the right to reject the application for membership without having to cite any reasons. Any applicant whose application has been rejected by the Executive Committee can reapply after a period of 2 years from the date of rejection of the application.
5. If the applicant's address is in any area under the jurisdiction of the Ahmedabad District it would be classified under the local category. The applicant needs to provide such details along with the application form.
6. The applicant needs to submit along with the application form two passport sized/ stamp sized photographs of each representative, with names written at the back.
7. The applicant needs to submit details of whether the enrolment fee and annual fee has been paid from its own bank account in a covering letter signed by him.
8. Provisions under GCCI Constitution will be considered final with regards to all the above information.
9. GCCI Constitution & Regulations Clause 6 provides for credit of enrolment fee to capital fund account to be used as Corpus Fund only against new development capital expenditure.

Fee for new members enrolling with one-year payment

Category	Enrolment Fee	Annual Fee	GST	Total
Association Members	2500	2000	810	5310
Regional Chamber Members*	15000	5000	3600	23600

Fee Structure for new members enrolling with payment of 3 years consolidated membership fee during the period from 1st October to 31st March

Category	Enrolment Fee	Annual Fee	GST	Total
Association/Mahajan	2500	4750	1305	8555
Regional Chamber*	15000	11500	4770	31270

Fee Structure for new members enrolling with payment of 3 years consolidated membership fee during the period from 1st April to 30th September

Category	Enrolment Fee	Annual Fee	GST	Total
Association/Mahajan	2500	5500	1440	9440
Regional Chamber*	15000	14000	5220	34220

***Note:**A Regional Chamber has first to become Business Association/Mahajan member and then apply to become a regional chamber member with The Chamber, if the required conditions are fulfilled.

- Tick on the amount applicable
- GST @ 18%
- Cheque/ D.D. to be in favor of "GUJARAT CHAMBER OF COMMERCE & INDUSTRY"
- Bank Details:-

Name	Gujarat Chamber of Commerce & Industry
Bank Name	Union Bank of India
Account No.	312802010046823
IFSC Code	UBIN0531286
Bank Branch	Ellis-Bridge, Ahmedabad
Type of Account	Saving Account

Checked By:

Asst. Secretary

Secretary

Jt. Secretary General

Secretary General