



ARCHITECTS & ENGINEERS ASSOCIATION

AEA BUILDING, KOKKALAI, THRISSUR - 680 021, KERALA

(Registered under Travancore-Cochin Literary Scientific and Charitable Societies Act XII of 1955)

APPLICATION FORM FOR MEMBERSHIP

Name	<input type="text"/>	Sex	<input type="text"/>	Age	<input type="text"/>	Date of Birth	<input type="text"/>
Address Residence	<input type="text"/>	Phone	<input type="text"/>				
		Mobile	<input type="text"/>				
		E-mail	<input type="text"/>				
Address Office	<input type="text"/>	Phone	<input type="text"/>				
		Mobile	<input type="text"/>				
		E-mail	<input type="text"/>				
Name of Spouse	<input type="text"/>	Date of Birth	<input type="text"/>	Date of Marriage	<input type="text"/>		
Name of Children	<input type="text"/>	Date of Birth	<input type="text"/>	<input type="text"/>			
	<input type="text"/>		<input type="text"/>	<input type="text"/>			
	<input type="text"/>		<input type="text"/>	<input type="text"/>			

Professional Qualification (Please specify year of completion and enclose copies of certificates)

Graduation :	<input type="text"/>	Branch & Specialisation :	<input type="text"/>
Post Graduation :	<input type="text"/>		
Doctorate/Research/ Post graduate diploma etc.	<input type="text"/>		
MEMBERSHIP			
Professional Bodies :	<input type="text"/>		
Other NGOs:	<input type="text"/>		
Hobbies :	<input type="text"/>		
Professional Experience :	<input type="text"/>		

Any other relevant details:-

I do hereby declare that the above statements are true to the best of my knoweldge and belief. I further declare that I shall abide by the rules and regulation as given in the bye-laws as they are in force from time to time.

I am enclosing Rs...../- only towards admission fee and annual / life subscription by cash/DD / Cheque bearing No.....dated.....drawn on.....payable to Architects & Engineers Association, Trichur

Place :
Date : Signature of the applicant

Introduced by A E A Member
Name and Signature

For Official Use only

Application received on :	Cash Receipt No. & Date:
Placed before executive committee on :	Admitted on:
Signature of the President	Category & Membership No.:
If rejected refund voucher No. & Date:	Intimation letter No. & Date:
	Signature of the Secretary