

Application form for MEMBERSHIP



Grow Care India (GCI) Application form Membership

DETAILS OF THE APPLICANT COMPANY

Name of the company _____

Address _____

Pin _____

Tel: _____ Fax _____ Email _____

Address in Delhi (if any) _____

Pin _____

Tel (off) _____ Fax _____ Email _____

PAN No _____ TAN No _____

CEO/Chairman/President _____

Designation _____

Address _____

Pin _____

Tel (Off) _____ Fax _____

Email _____

Main line of Business _____

Other Business Interests _____

Latest Gross Turnover in Crores (INR) _____ Financial Year _____

No. of Employees (approx.) _____ Year of establishment _____

Location of major factories/branches _____

Export Turnover \$ _____ Year _____

Countries we export to _____

Whether the Company is Listed Yes No

Key Indian states of your business interest _____

Date

Name & Designation

Signature of the Applicant

Grow Care India Advantages

Networking <ul style="list-style-type: none">• Platform to interact amongst members, institutions, state & central governments• Platform to meet global business and political leaders• Participation in seminars, training programmes, conferences and meeting• Platform to network with industry leaders	10% to general members on participation Fee of GCI events (applicable only on the fee component charged by GCI)
Business Services <ul style="list-style-type: none">• Opportunity for participating in Sectoral delegations both in India and Overseas• Participation in trade fairs and exhibitions• Develop business through buyer–seller meets• Government Notification Updates	10% to general members on Delegation Fee (applicable only on the fee component charged by GCI)
Knowledge series	Free Access to Policy Papers, Studies & Surveys, MSME Newsletters

- Membership fees 25000/- exclusive service tax 15%
- Fill up the form and mail us :- mail@growcareindia.org; info@growcareindia.org