

Application Form for Associate Membership

**The Secretary General,
Indian Beverage Association,
5th Floor, PHD House, Siri
Fort Road,
NEW DELHI - 110 016**

Date:

Dear Sir,

We wish to become an Associate Member of the **Indian Beverage Association (IBA)**, request you to kindly place our application before the Managing Committee of the Association and look forward to receiving a communication from you about acceptance of the same. The requisite particulars are given below.

Details of the Applicant	
Name of the Applicant	
Year of Incorporation/Registration (as applicable)	
Address	
Land Line(s)	
Fax	
E-mail	
Office in Delhi/NCR (if applicable)	
Address	
Land Line(s)	
Fax	

E-mail			
Name, Designation and Address of the Chief Executive			
Contact Details	Land Line	Fax	Email
Main Line of Business			
Turn over as per the Latest Audited Balance Sheet	Financial Year	Turnover (in Rs.)	
Number of Employees			
Location of main production units (Attach extra sheets, if necessary)			
Name/ address of the Overseas Holding Company, if any			
Turnover of ultimate Holding Company			
Details of the person Nominated to represent the Company in the IBA			
Name, Designation and address of the Nominee			
Contact Details	Land Line	Fax	Email
Name of the Personal Secretary			
Details of Membership of other Associations/Federations, if any			

We agree to abide by the Memorandum of Association and the Rules of the Indian Beverage Association. A Cheque/Demand Draft payable at Delhi bearing No. _____ dated _____ for Rs.50,000 being the one-time non-refundable Entry Fee and a Cheque/Demand Draft payable at Delhi bearing No. _____ dated _____ for Rs.45,000 being the annual non-refundable Subscription Fee for the financial year _____ in favour of the **Indian Beverage Association** are enclosed.

Your faithfully,

Date: _____ **Name and Designation:** _____ **Signature** _____

List of Enclosures	Remarks	
	Yes	No
Certified copy of the latest audited Balance Sheet and Profit and Loss Account		
Corporate Brochure/Company Profile		
Certified copy of Resolution of the Board of Directors/ Managing Committee /Governing Body/Governing Council for becoming Associate Member of IBA and nominating a specified person to be the Organisation's representative in IBA		
Certified Copy of the Memorandum of Association and Articles of Association /Rules /Bye-Laws		

For Office use only:

This application was considered by the Managing Committee on _____ and was accepted/ rejected.

Date _____

Signature of Secretary General

EXTRACT OF RULE 4 (A) OF THE RULES OF THE INDIAN BEVERAGE ASSOCIATION

“Any individual, sole proprietor, registered firm or Company falling in any of the categories listed below shall be eligible, subject to other terms and conditions as listed herein and specified from time to time by the Managing Committee, to apply for the Membership of the Society:

- (i) Producers or manufacturers or bottlers of fruit juices and fruit drinks, packaged drinking water, carbonated soft drinks, mineral water, tea and coffee, sports and energy drinks, dairy products and other non-alcoholic beverages of like nature;**
- (ii) Franchisees of the above mentioned producers or manufacturers or bottlers;**
- (iii) Vendors to the above mentioned producers, manufacturers or bottlers, (iv) Associations, if any, of the vendors/franchisees to the producers or manufacturers or bottlers of non-alcoholic beverage.”**