



**ANNUAL MEMBERSHIP RENEWAL FORM  
(INDIVIDUAL) 2018-2019**

Please complete and return to.

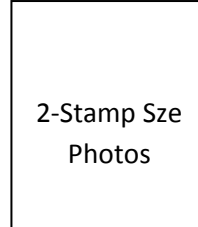
**Ahmedabad Management Association**

ATIRA Campus, Dr. Vikram Sarabhai Marg, Ahmedabad 380 015

**Phone:** 079-26308601 **Fax:** 079-26305692

**Email:** ama@amaindia.org

**Website:** www.amaindia.org



**Membership No.** \_\_\_\_\_ (Previous Year)

**Name:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

**Address for** \_\_\_\_\_

**Communication:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**City :** \_\_\_\_\_ **Pin-code:** \_\_\_\_\_

**Phone: (O):** \_\_\_\_\_ **(R):** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **(M):** \_\_\_\_\_

**Email:** \_\_\_\_\_

**We are sending the Membership fee Rs 1770/- (Including GST) by:**

NEFT

CHEQUE

CASH

CREDIT/DEBIT CARD

**Date:**

**Signature**

**Note:-**

(Please collect your Member ID card from (AMA Office) Reception Counter after 2 Weeks.)