

Computer Society of India™

Samruddhi Venture Park, Unit No.3, 4th Floor, MIDC, Andheri (E),

Mumbai-400 093 Maharashtra, INDIA. Phones: 9967305976/ 09920847311

Email ids: swapnilcsi2020@gmail.com/ sonalicsi28@gmail.com/

Website-www.csi-india.org

Application for Renewal of Individual Membership

I. Please fill in below information so that we can serve you better. (*) Indicates mandatory fields Membership No.* Title of the applicant * Mr. Miss. Prof. Mrs. FirstName* Middle Name Last Name* Name you would like to be printed on CSI ID card* (Max 30 letters) **Total work experience in years: CSI Communications: Hard copy** Soft copy (Please tick) I would like to renew membership for the following years. *

Note for Life membership: Can even be paid in 4 equal instalments spread over 4 years*:-each year Rs. 2500.00 + 18% GST= Rs. 2,950.00

ThreeYears

Rs.3068.00

TwoYears

Rs.2124.00

i. Three PDCs of the amount Rs. 2,950.00 are to be given in the first year itself, along with the Membership Application Form.

FourYears

Rs.4012.00

Life

Rs.11800.00

- ii. Membership shall be terminated with immediate effect, if the PDCs are notrealized.
- iii. Additional liability, on account of any subsequent changes in the GST rule will need to be paid by the member.
- iv. In case you have renewed your membership to life we request you to send one digital passport size photograph with 300 resolution pixels preferably 3X3 in size to Swapnilcsi2020@gmail.com for photo ID card.

OneYear

Rs.1180.00



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same. (Address	proof required, if it is newaddress)
III.PaymentDeta	
	ode of Payment: [Cheque/DemandDraft/NEFT]
UTRNo	through NEFT–TransactionDateAmountin Rs
If payment mad	e through Demand Draft / Cheque payable at par at Mumbai should be drawi
	uter Society of India".
Cheque	DD NEFT (Please tick asapplicable)
Amount Paid Rs	. /\$
Cheque / DD No.	Dated Dated Dated
Drawn on Bank N	Name Branch Name
ase fill following o	details if it is direct deposit in SBI bank.
e of Deposit	d d / m m / y y y
deof Deposit	Cheque DD NEFT (Please tick as applicable)
Deposit branch	name
k Details	
_	er Society of India.
κ Name: State B Γype: Saving	ank of India
No: 10865762700	
C code: SBIN000	7074

side of the Cheque / DD / Pay-in- Slip.

Attach photocopy of Pay-in-slip with application form and write your Name, Contact no. on the reverse



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IV.Code of Ethics -Undertaking:

I affirm that as a CSI member, I shall abide by the Code of Ethics of the Computer Society of India (CSI). I, further, undertake that I shall uphold the fair name of the Computer Society of India by maintaining high standards of integrity and professionalism. I am aware that my breach of the Code of Ethics may lead to disciplinary action against me under the Byelaws and rules of the CSI. I, hereby, confirm that I shall be bound by any decision taken by the CSI in such matters. Further, I hereby convey my consent to receive the CSI publications in soft copy form and any other information about the activities of the society by email or by SMS on my Mobile number, from time to time, by the society or the members of the society.

Date: / /	,	
Place:		Signature: