



# INSTITUTE OF URBAN TRANSPORT (INDIA)

(Registered under the Societies Registration Act)

## MEMBERSHIP FORM

The Executive Secretary,  
Institute of Urban Transport (India)  
P.O. Box-5407, Nirman Bhawan,  
Maulana Azad Road,  
New Delhi- 110 011

Dear Sir,

I desire to become a member of **Institute of Urban Transport (India)**. I agree to abide by the Memorandum of Association and Rules & Regulations of the Institute as in force from time to time.

I enclose cheque/bank draft No. \_\_\_\_\_ dated \_\_\_\_\_ drawn on \_\_\_\_\_ payable at New Delhi in favour of **INSTITUTE OF URBAN TRANSPORT** (A/c Payee) for Rs.3,000/- (Rupees Three Thousand only) towards the Life Membership Fee, and my particulars are as follows.

1. Name (Shri/ Smt./ Dr. / Prof./ Ms.) \_\_\_\_\_
2. Designation/Organisation \_\_\_\_\_
3. Date of birth \_\_\_\_\_
4. Academic Qualifications \_\_\_\_\_
5. Details of positions held in Govt./Undertakings \_\_\_\_\_
6. Professional Membership, If any. \_\_\_\_\_
7. Special interest areas in Urban Transport \_\_\_\_\_
8. Address for correspondence \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Telephone Office \_\_\_\_\_ Resi \_\_\_\_\_  
Fax \_\_\_\_\_ E-mail \_\_\_\_\_  
Mobile \_\_\_\_\_

Yours faithfully,

Date \_\_\_\_\_

Signature: \_\_\_\_\_

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