



P -29, SOUTH EXTENSION PART 2,
NEW DELHI - 110049, INDIA
indiasteviaassociation@gmail.com,
0091 9811988880

MEMBERSHIP FORM

Dear Sir,

I wish to enroll as Associate Member of “**India Stevia Association**”.

I understand my associate membership is free of charge at the moment;

I agree to abide by the Rules and Regulations of the association as framed from time to time and will like to receive **E-mail Newsletter** with updates on Stevia and any other benefit offered by ISA.

1. Name of Applicant:

2. Company:

3. Designation and Official Correspondence Address:

E-mail:

Mobile:

4. Professional Interest in Stevia:

5. Area of specialization:

6. Current Activity:

7. Mention specific interest if any & major problem you are facing while working on Stevia:
(Use extra sheet if required)

Date:

Signature

| | Personal Membership | | INSTITUTIONAL CONTRIBUTION | |
|--|---------------------------|----------------|----------------------------|---------------|
| | India (INR) | Abroad (US\$) | India (INR) | Abroad (US\$) |
| <input type="checkbox"/> Associate Membership: | Free of charge | Free of charge | Welcome | Welcome |
| <input type="checkbox"/> Regular Membership: | As per rules & regulation | | | |

Please tick as appropriate. Associate Membership will include the E-news letter “**Stevia on Move**”.