



MEMBERSHIP APPLICATION FORM

International Professional/ Institute/ Corporate Members

Category	Annual Membership Fee	Total (USD)
Foreign Firms HQ outside India and no representative office in India	\$2000	\$2000

Note: Membership validity is for Calendar Year (January -December)

Name of Organisation / Association / University:

Turnover of the Company: _____

No. of Employees: _____

GST No (If applicable): _____



Personal Details:

Name of the person: (Head of Organisation):

Designation: _____

Address: _____

City: _____

Pin Code: _____

State: _____

Mob: _____

Tel: _____

Fax: _____

Email: _____

Website: _____

Area of Study / Work/ Interest: _____

Please provide the names of three people from your Organization who should be included in the membership list of ABLE so that they can receive all mailers and communication

	Name	Designation	E-mail
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____



Payment Modes:

1. NEFT/ RTGS Transfer:

Bank Details :	
Description	Information
Vendor Name	Association of Biotechnology Led Enterprises
Address of Communications	#123/C 16th Main Road, 4th Block, 5th cross, Koramangala Bangalore - 560034
Phone No	080-41636853
Bank Name	Yes Bank Ltd
Bank Branch Name	Kasturba Road Branch
Bank account Number :	002294600000104
IFSC Code	YESB0000022
MICR Code	560532002
SWIFT Code	YESBINBB
GSTIN	29AABTA0330JIZ2
ABLE PAN NO.	AABTA0330J
Bank Address line 1	Ground floor, Prestige Obelisk
Bank Address line 2	Municipal No 3,
Bank Address line 3	Kasturba Road, Bangalore - 560001
State	Karnataka

2 .Cheque / DD payable at Bangalore, made in favour of Association of Biotechnology led Enterprises.

Please return the completed form to the below address:



ASSOCIATION OF BIOTECHNOLOGY LED ENTERPRISES

ABLE Secretariat

No 123/C 16th Main Road 5th Cross 4th Block
Koramangala Bangalore 560 034

Tel/ fax: +91 80 2563 3853/ 4163 6853 E-mail: info@ableindia.org.in Website:
www.ableindia.in