



Computer Society of India™

Samruddhi Venture Park, Unit No.3, 4 Floor, MIDC, Andheri (E),
Mumbai-400 093 Maharashtra, INDIA.

Phone : 022-2926 1700 Fax : 022-2830 2133

Email : hq@csi-india.org website : www.csi-india.org

January 2014

Application for Renewal Individual Membership

(*) Indicates mandatory fields

Membership No.*

Title of the applicant * Mr. Miss. Mrs. Dr. Prof.

First Name*	Middle Name	Last Name*
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name you would like to be printed on CSI ID card*

(Max 30 letters)

I would like to renew membership for the following years.*

One Year	Two Years	Three Years	Four Years	Life
<input type="checkbox"/>				



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VI. Membership Subscription Fees

1. Individual Membership Fee

Enrolment during 1st April to 30th September

Membership Category	One Year ₹.	Two Years ₹.	Three Years ₹.	Four Years ₹.
Individual				
(Within India)	1124	2023	2921	3820
(Outside India)	\$ 60	\$ 110	\$ 150	\$ 180

Enrolment during 1st October to 31st March

Membership Category	Up to 31st March + One Year ₹.	Up to 31st March + Two Year ₹.	Up to 31st March + Three Year ₹.	Up t 31st March + Four Year ₹.
Individual				
(Within India)	1685	2584	3483	4382
(Outside India)	\$ 90	\$ 130	\$ 165	\$ 210

2. Life Membership Fee

Age Group	Life Subscription	
	Within India ₹.	Outside India \$
Below 30 years	11236	800
30 < 40 years	10112	800
40 < 50 years	8989	650
50 years and above	6742	500

Note : Service Tax @12%, Education cess @ 2% of ST, Higher Education cess @ 1% of ST is included in the above fees.



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VII. Payment Details*

DD / Cheque payable at par at Mumbai should be drawn in favour of "Computer Society of India".

Cheque DD Cash (Please tick as applicable)

Amount Paid ₹/\$

Cheque / DD No. Date / /

Drawn on Bank Name Branch Name

Please fill following details if it is direct deposit in Axis bank.

Date of Deposit / /

Mode of Deposit Cheque DD Cash (Please tick as applicable)

Axis Deposit branch name

Axis Bank SB A/c. No. 060010100082439.

Attach photocopy of Pay-in-slip with application form and write your Name, Contact no. ,
Membership period on the reverse of the Cheque / DD / Pay-in- Slip.



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VIII. 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 was a member (Membership No. _____) Earlier and membership ceased without prejudice.

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.

Place :

Signature : _____

Date :

.....

FOR OFFICE USE ONLY

Application received date : _____

Received By : _____

Application processed by : _____