

Membership Form 2012 : Professional

Thank you for the considering the membership of the Association of Designers of India (ADI).

Upon the receipt of the payment, your membership will be initiated. Please note that the membership is valid for the financial year and approval during which it is granted, Please note that you will be intimated of your membership approval status by email.

Please fill the form in block letters and check (✓) appropriate boxes

New Member Renewal

Full Name

Gender Male Female Date of Birth
DD MM YY

Permanent Address for correspondence

State City

Country Pin Code

Email 1 Email 2
Primary Secondary

Phone 1 Phone 2

All communication received from primary email ID will be treated as official communication between ADI and the member. Onus is upon the member to intimate ADI of any change in address of correspondence and email ID by writing to connect@adi.org.in or through hard copy intimation sent through regd. Post to ADI.

Designers with Professional qualifications or Expertise (Please mention details of all your design qualification)

Institute (Graduation) _____ Yr. _____

Institute (Post Graduation) _____ Yr. _____

Year of passing out _____ Discipline _____ PHD.

My current Area of Practice _____

Industrial Design (Includes Product, Textile, Toy, Ceramic, Automotive & Furniture design) • Exhibition Design •
Communication & Graphic Design • Apparel & Lifestyle Design • Design Engineering • Fashion Retail Design •
Accessory Design • Interior Architect • Interaction Design • Universal Design • Human factors Design •
Architecture • Sustainable & craft design • Film and Animation •

For Non-Indian Citizens Nationality _____

I am a foreign national
but am employed in India

I am a Person of Indian
Origin with a legal PIO status

My interest lies in _____

Membership Program Design Education Design Propagation

Design Events & Organisation ADI Management Funds & Finance

Membership Period 1 year 2 year

You may attach a cheque for the appropriate membership type and duration, if so advised by an ADI member. Read membership fee guide in this document. This cheque will be deposited only when your membership application is approved. Please bear in mind that if the membership is not approved (for whatever reason) then the cheque will be returned to you.

Please make payment by crossed cheque in favor of 'Association of Designers of India', payable at par anywhere in India. Chq. No. _____ Bank Name _____ Date _____

I have read, understood & accept the rules and regulations, practice & ethics of ADI. (www.adi.org.in)

I agree to abide the rules & by laws, decisions made by the general assembly & NEC of ADI.

Date : _____ Signature of Applicant