



J. B. NAGAR CPE STUDY CIRCLE OF WIRC
(OF THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA)



4A Kaledonia Building, 2nd Floor, Sahar Road, Near Andheri Station,
Andheri (East), Mumbai - 400 069, Tel No. 98202 40246
Website: www.jbnagarca.org Email: jbnagarcpe@gmail.com

APPLICATION FORM FOR MEMBERSHIP
(Financial Year 2018 - 2019) New / Renewal

Name : CA _____ ICAI M. No. : _____

Name of the Firm / Company: _____

Occupation : Practice Service Designation: _____

Address for Correspondence _____

Tel.:1) _____ 2) _____ Fax: _____ Mobile: _____

E-mail: _____ Website: _____

Date of Birth: ____/____/____ Blood Group: _____ Spouse Name: _____

Are you Member of C.A. Benevolent Fund : Yes No If Yes give your details: _____

DETAILS OF MEMBERSHIP FEES: w.e.f. 21.10.2018 up to 31.03. 2019

PARTICULARS	FEES	AMOUNT PAID
Study Circle Membership Fees (including Rs.100 towards contribution to CABF)	1100	
For Members Registered with ICAI after 01.01.2017 - (Entrance Fees Waived) (including Rs.100 towards contribution to CABF)	600	
Study Group 1) Taxation 2) Other than Taxation	400	
Entrance Fees (For New Members only)	waived	
TOTAL		

Would you like to contribute to the following activities of Study Circle?

Being a faculty / speaker at Study Circle Meetings/Conferences/Seminars/Work Shop etc.

If Yes: Topic _____

Being part of the Core Group, which runs the functioning of Study Circle:

If Yes: How _____

I agree to be in your mailing list.

I agree to be a member of the Study Circle and pay/enclose herewith cash/cheque no. _____
dated _____ drawn on _____ in favour of "J. B. NAGAR CPE STUDY CIRCLE
OF WIRC" for Rs. _____

Bank Details for NEFT:

Canara Bank J B Nagar Branch

Account no: 2675101005181

IFSC: CNRB0002675

Account Name: J B Nagar CPE Study Circle

Saving Account

Please send the acknowledge receipt after the payment.

Date : _____

Signature of Applicant