



# INDIAN NATIONAL CARTOGRAPHIC ASSOCIATION

## APPLICATION FORM FOR MEMBERSHIP

Name (in block letters) Mr./Ms.....Date of Birth.....

Qualifications.....

Position held.....\*Grade of membership applied.....  
(See reverse for details)

Present Address..... Permanent Address.....

.....  
.....  
.....

City.....Pin Code..... City.....Pin Code.....

Phone No. .... Phone No. ....

Email :

Experience/Papers presented (if space is inadequate an additional sheet may be attached).

Details of payment ( Draft may be drawn in the name of INCA on any Nationalized Bank payable at Hyderabad.

Amount	Mode	Details of Draft	Remarks
Rs.....	Cash/ Draft.....		

I hereby declare that the foregoing is a full and correct statement to the best of my knowledge and belief.

Date.....

Place.....

Signature of Applicant

Proposed by.....

Membership No.....

Date.....

Signature of Proposer

**Mailing Address – Secretary General , INCA,  
Room No.234 , 2<sup>nd</sup> Floor APGDC Block, Survey of India  
Uppal, Hyderabad-500 039.**

**Phone & Fax: 040-27202217**

**E-mail: [secretarygeneralinca935@gmail.com](mailto:secretarygeneralinca935@gmail.com)**

**Website: <http://www.incaindia.org>**

\*Categories of Membership and Rates of fees payable:

Student Member	Rs. 50/- per annum	Institutional Member	Rs. 1,000/- per annum
Life Member	Rs. 1,000/- payable	Institutional Life Member	Rs. 8,000/- paid in lumpsum
Benefactor	Rs. 2,000/- or more paid in lumpsum	Sustaining Member	Rs.3000/- paid in lumpsum

For Office Use

Rs.....Receipt No. & Date.....Rs.....Receipt No. & Date.....

Rs.....Receipt No. & Date.....Rs.....Receipt No. & Date.....

Admitted as.....Member. Membership No.....Date of Admission.....

**Treasurer**

**Secretary/Secretary General**