



Confederation of Sports and Recreation Industry

Industry's Voice for Sports Ecosystem

MEMBERSHIP APPLICATION FORM

APPLICATION FORM

CATEGORIES

Please tick any one

Core Membership

Corporate Membership

Associate Membership
(Industry Associations
and Sports Federation)

Individual
(See Eligibility)

Name of the Applicant			
Address of the Applicant			
Name of Authorized Representative of the Applicant			
Designation of /Authorized Representative of the Applicant			
Email id	Office Tel. No.	Mobile No.	
Name & Designation of the contact Person			
Email id	Office Tel. No.	Mobile No.	
Nature of Business of Applicant (only for Corporate Applicant) (Please tick)	<input type="checkbox"/> Company / LLP/ Partnership <input type="checkbox"/> Corporate Body <input type="checkbox"/> Trust / Society <input type="checkbox"/> Company u/s 8 <input type="checkbox"/> Association / Federation <input type="checkbox"/> Government (Institution/body/other) <input type="checkbox"/> Other (Please specify applicable category)		
Occupation/Business/Profession of the Applicant (Please tick)	<input type="checkbox"/> Sportsperson / Coach / Expert / Administrator <input type="checkbox"/> Coaching Centre / Sports Academy <input type="checkbox"/> Academic / Education Institution <input type="checkbox"/> Broadcasting / Media <input type="checkbox"/> Manufacturing <input type="checkbox"/> Trading / Supplier <input type="checkbox"/> Services / Consultancy <input type="checkbox"/> NGO / Trust/ Sports Association <input type="checkbox"/> Other (Please specify type)		
<ul style="list-style-type: none"> • Service <input type="checkbox"/> • Professional <input type="checkbox"/> • Self Employed <input type="checkbox"/> 			



Signature of the Applicant/Authorized Representative with Stamp (only in case of a Corporate Applicant)		Name	Designation
Date			

This application should be proposed and seconded by two existing CSRI members / Founder Advisors / Office Bearers

_____ Signature _____ Designation _____ Membership number

Proposed by Signature Designation Membership number

_____ Signature _____ Designation _____ Membership number

Seconded by Signature Designation Membership number

I/We would like to apply for the admission as the membership. I/we shall be bound by the Memorandum and Articles of Association of CSRI. The Application Form, duly completed and the Cheque/ DD / NEFT No. _____ dated _____ towards admission subscription amount and GST (one time admission fee) drawn on _____ for Rs. _____, favoring **"CONFEDERATION OF SPORTS AND RECREATION INDUSTRY"** is submitted along with the relevant supporting documents.

Kindly acknowledge receipt of the above and confirm the membership.

_____ Signature _____

Date Name and Designation Signature



Kindly send the duly filled up form to:

Membership Division

Confederation of Sports and Recreation Industry

1, Upper Second Floor, 50-51, Regal Building,
Parliament Street, Connaught Place, New Delhi – 110 001

M: +91 011- 46018995, 9958339900

E: contact@csri.co.in

W: www.csri.co.in

Yearly Membership Subscription

One Time Admission Fee	Rs 1,000
Core Membership	Rs 2,50,000
Corporate Membership	Rs 25,000 (if turnover is more than 10 Cr) Rs 20,000 (if turnover is between 5 Cr - 10 Cr) Rs 15,000 (if turnover is between 1.5 Cr -5 Cr) Rs 10,000 (if turnover is below 1.5 Cr)
Associate	Rs 5,000 (Sports Association and Federations)
Individual	See Eligibility

GST (Goods & Services Tax) 18% is applicable on the subscription amount.

OFFERS	CORE	CORPORATE	ASOCIATATE
Part of Executive Committee	YES	NO	NO
Voting Rights	YES	NO	NO
Opportunities to participate in B2G Meetings	YES	NO	NO
Part of Working Committee	3	2	2
Invitation and Discount on all events	40%	25%	15%
Access to Research and Knowledge papers	YES	40% Discount	25% Discount
Opportunities to participate in B2B Meetings	YES	Yes	Yes
Invitation to participation and interaction with overseas delegation	YES	Yes	Yes
Networking Opportunities	YES	Yes	Yes
Partenering in Government Projects and Initiatives	YES		NO



Applicant's GST Details for Raising Invoice (Mandatory)	
Name of Applicant (As per GST Registration Certificate)	
GST No.	
Billing Address with City & Pin	
State	
TAN	
PAN	
Name & Designation of Applicant's Accountant	
Email id & Phone no. of Applicant's Accountant	

Bank Account Details for NEFT / RTGS Payment

Particulars	Details
Account Holders Name / Name of the Beneficiary	Confederation of Sports and Recreation Industry
Name of the Bank	ICICI Bank
Bank Account Number	663005601110
Branch Address	82, Janpath, Connaught Place Delhi 110001
Branch Code	6630
Account Type / Nature of Accounts	Current
IFSC Code	ICICI0006630

PS. - The Company first needs to send the expression of interest by means of sharing the duly filled membership form with www.csri.co.in On receipt of the form, CSRI will process the application. Once approved, an Invoice towards Admission Subscription will be sent to the applicant.

Name & Designation:

FOR OFFICE USE ONLY

Approved

Not Approved (With Reason)

Date:

Membership No: