

**THE SOUTH INDIA TEXTILE RESEARCH ASSOCIATION
COIMBATORE**

MEMBERSHIP DATA SHEET

Membership type (tick appropriate box)	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 5px;">Full</td> <td style="width: 20px; height: 15px;"><input type="checkbox"/></td> </tr> </table>	Full	<input type="checkbox"/>	<table border="1" style="margin: auto;"> <tr> <td style="padding: 2px 5px;">Associate</td> <td style="width: 20px; height: 15px;"><input type="checkbox"/></td> </tr> </table>	Associate	<input type="checkbox"/>	
Full	<input type="checkbox"/>						
Associate	<input type="checkbox"/>						

1. Name of the Organisation _____
2. Year of Establishment _____
3. Date of Enrolment (to be filled by SITRA) _____
4. Address

Regd./Corp. Office	
Factory	
Correspondence	

	Regd. Office	Factory	Correspondence
Telephone			
Fax			
Grams			
E-mail			

5. Legal Status* :

**(Public Ltd., Private Ltd., Partnership, Proprietorship, etc.,
If the unit is not a separate registered legal entity, mention "Unit")*

6. Nature of Activity **Spinning** **Weaving** **Processing**
(tick appropriate boxes)

Others, specify

7. Indicate briefly product type

8. **Capacity as on** ___ / ___ / _____

Spinning / Weaving Units :

		Installed	
Ring Spindles			<input type="text"/>
Rotors →	Ordinary		<input type="text"/>
	High Speed		<input type="text"/>
Looms →	Shuttle		<input type="text"/>
	Shuttleless		<input type="text"/>

Processing Units :

Yarn processing capacity per day in kg

Cloth processing capacity per day in metres

9. Annual turnover (Rs in crores) as on ___ / ___ / _____

10. Details of three Senior/Top Executives who are empowered to act and vote on behalf of the mill (in the order of priority) :

	Name	Designation	Telephone		Residential address
			Office	Residence	
1.					
2.					
3.					

11. Details of Officials for Contact:

	Name	Designation	Telephone		Residential address
			Office	Residence	
1.					
2.					
3.					

12. Whether member of any other TRAs **ATIRA** **BTRA** **NITRA** **NONE**
(tick appropriate boxes)

*Note: In case of more than one unit, please fill up similar form separately for each unit.
 In case space of any column is insufficient, information may be given in a separate sheet.*

Authorised Signatory

(Company seal)

Name _____

Designation _____

FORM OF ADHERENCE

(Annexure 'A' specified under Clause 4 of the Rules & Regulations)

To

The Chairman
The South India Textile Research Association
Coimbatore - 641 014

Dear Sir

In consideration of the advantages afforded by The South India Textile Research Association to its members, we (mill name)_____ engaged in (nature of activity)_____ at the place (address)_____

having carefully read and fully understood the provisions of the Memorandum of Association and the Rules and Regulations of the said Association, do hereby declare and agree that we will during our membership of the said Association in all things confirm faithfully and absolutely to all the said provisions of the Memorandum of Association and the Rules and Regulations and to such other rules as the Association shall make by a resolution duly passed in accordance with the relevant provisions therein, and we will in all things endeavour to further the object of the Association.

Yours faithfully

(Signature of the Applicant with Office Seal)

Place:

Name :

Date

Designation :

(To be filled by SITRA)

Name of the Mill / Unit	:	
Installed Capacity	:	
Membership Category	:	Full <input type="checkbox"/> Associate <input type="checkbox"/>
Date of Application	:	
Date of Council Approval	:	

Signature of the Authorised Official