

ALL INDIA PHOTOGRAPHIC TRADE & INDUSTRY ASSOCIATION

C-3, 1st Floor, Taj Building, 210, Dr. D. N. Road, Fort, Mumbai- 400001. • Tel. No.022 22076201 E-mail: info@aiptia.org • Website: www.aiptia.org

FORM OF NOMINATION TO BE FURNISHED IN TRIPLICATE

(As per Resolution 1 passed during the Special General Meeting held on 22.03.2024)

(For Individual / Proprietor Member)

Sir,						
1. I,(Name as per Memb		, an Indivi	dual/Proprietorof		, ar	m member of the
All India Photograp		lustry Associa	ation naving addre	ess at C-3, Taj Bull	aing, 210, Dr	. D. N. коаа,
Fort, Mumbai – 400		issued by	the said Associat			
2. I hold Life Member						
3. I hereby nominate	the person whose	e particulars a	are as given below	/:-		
Name of Nominee	Permanent A Nomir		Mobile No. and Email ID	Relationship with nominators	DOB of nominee	
						(Photo of Nominee)
members) on his/her regarding requiremer membership without	complying with thats of admission to	ne provisions	of Memorandum	and Rules & Regu	ulations of the	e Association
members) on his/her regarding requirement membership without Yours faithfully, (Signature) Name of the Member	complying with the complying with the complying with the compayment of fee.	ne provisions o membershi	of Memorandum	and Rules & Regu	ulations of the	e Association
members) on his/her regarding requirement membership without Yours faithfully, (Signature) Name of the Member	complying with the complying with the complying with the compayment of fee.	ne provisions o membershi	of Memorandum	and Rules & Regu	ulations of the	e Association
I state that on my deamembers) on his/her regarding requirement membership without Yours faithfully, (Signature) Name of the Member Place: Date: / /	complying with the complying with the complying with the compayment of fee.	ne provisions o membershi	of Memorandum	and Rules & Regu	ulations of the	e Association
members) on his/her regarding requirement membership without Yours faithfully, (Signature) Name of the Member Place: Date: / / Witnesses:- Witness 1:	complying with the complying with the complying with the companyment of fee.	ne provisions o membershi	of Memorandum p and on his/her s Witness 2:	and Rules & Regu	ulations of the	e Association
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members) on his/her regarding requirement membership without Yours faithfully, (Signature) Name of the Member Place: Date: / /	complying with the street of admission to payment of fee.	ne provisions o membershi	Witness 2: (Signature) Name of the V Address: Email id & Mo	and Rules & Regulation of a from the state of the state o	ulations of the	e Association on for

(Signature of office bearers)

STAMP