

Common Registration Form

**AHMEDABAD BRANCH OF WIRC OF
THE INSTITUTE OF CHARTERED ACCOUNTANTS OF INDIA**

**Affix recent
passport sized
photograph**

Study Group (Tick the option)

Auditing, Accounting Standards & Co. Act

Direct Tax

1. Full Name in block letters (as per Institute records) :

First Name :

Middle Name:

Last Name:

Gender :

Male

Female

2. Member Details:

(a) Membership Number :

(b) Membership Status :

ACA OR FCA

(c) Whether in Practice or in Industry?

(d) Any Other Qualifications :

3. Professional Details:

(a) Designation :

(b) Organization :

(c) Address :

(d) Nature of Duties :

4. Address for Correspondence:

(a) Door Number :

(b) Street/Road :

(c) Area :			
(d) City / Town :	(e) PIN Code	(f) State	

5 Phone:			
Phone no. with STD Code :		Mobile no.:	

6 Email Address:			
Official :		Personal :	

7 Details of Fee:				
Bank Draft / Pay Order no. :		Date		
Amount in Rs. :				
Drawn on Bank		Branch		

8 Food Choice	Jain Food		Regular Food	
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(Signature of the applicant)

Date :

Place :

Note :

- 1.. Fee Structure: **Rs. 2,000/- per member per study groups.**
2. In case the payment is through Online / Cheque /D. D./Pay Order, it should be drawn in the favour of "**Ahmedabad Branch of WIRC of ICAI**", payable at Ahmedabad.
3. Paste on the top in the box one Passport Sized photograph.