

THE INDIAN INSTITUTE OF ARCHITECTS

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STUDENT MEMBERSHIP FORM YEARLY SUBSCRIPTION RS. 200/-

NAME :

ADDRESS :

TELEPHONE :

MOBILE:

EMAIL:

YEAR OF JOINING ARCHITECTURAL STUDIES :

DATE OF BIRTH :

NATIONALITY :

NAME OF PARENTS / GUARDIAN :

ADDRESS :

I have gone through the rules and regulations of The Indian Institute of Architects and shall abide by them.

Signature of Student

SHRI / KUM.
is a bonafide student of
our institution & He / She is
at present studying in

_____ class

Signature of Head of Institute

The above information is correct to the best of my knowledge
(Proposed & Seconded by Members of I.I.A)

1)

2)