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TRANSLATORS' INITIATIVE
K-5/B, LOWER GROUND FLOOR,
KALKAJI, NEW DELHI -110019
Tel: 011-26291676 Fax: 011-51675530

*LAST DATE FOR
REGISTRATION
SEPTEMBER 12, 2005*

E-mail: info@translatorsinitiative.org Web: www.translatorsinitiative.org

MEMBERSHIP REGISTRATION CUM PARTICIPATION FORM
Indian Translators Meet 2005, New Delhi
17th September, 2005 (0900 Hrs till 1800 Hrs)

| | |
|--|---|
| Name of Representative | |
| Designation | |
| Organization (Agencies Please mention your company name) | |
| Address / Mailing Address | |
| Contact Nos. with STD code | |
| Mobile No. | |
| E-mail (a) | |
| E-mail (b) | |
| Website / URL (if any) | |
| You are paying a Fee of | INR 500/- (For professionals and agencies) INR 200/- (For Students only) INR 100/- (For those who are only interested in getting enlisted on site www.translatorsinitiative.org) |
| Language Pairs | |
| Please describe in brief about your skills and area of specialization including translation capacity | |
| Qualification / Experience (Agencies Please mention year of experience) | |
| Computer Skills / Localization tools | |
| What are your expectations from the meet? | |
| (Please specify here): | |
| How will you contribute towards growth of this forum? | |
| (Please specify here): | |
| Any other details/ comments that you want to offer - | |
| Are you interested in becoming a member of proposed INDIAN TRANSLATORS ASSOCIATION ? | Yes No |

Date:..... Signature:.....

ACKNOWLEDGEMENT
(This section to be retained by participants)

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With thanks received INR _____ via cash / cheque / DD (no. _____) dated _____
Bank _____ with thanks from Mr./Ms./ M/S. _____ for
Membership Registration cum Participation fees, Indian Translators Meet 2005 to be held on 17th September, 2005, at
Residency Resorts, USI Complex, Rao Tula Marg, Opposite Subroto Park, New Delhi -110010

Emergency No. : 9810268481 (Ravi Kumar - Convenor)
9811638883 (Deependra Pandey – Organizing Committee)

For TRANSLATORS' INITIATIVE
(Treasurer)