



Association of Indian Laboratories

Office Address: 113, 1st Floor, Sushant Tower, Sector-56, Gurugram, Haryana-122011
Email: aoilsecretariat@gmail.com | Web: www.aoil.in | Regd. No: HR 018201401605

MEMBERSHIP FORM (MF-01)

1. Name of Laboratory.....
Address of Laboratory
.....
2. Name of Laboratory Representative.....
3. Name of Alternate Representative.....
4. Field of Lab.: Medical / Testing / Calibration / GLP Laboratory..... **(Tick the applicable)**
5. Legal status: Proprietorship / Partnership / Private Ltd. / Public Ltd. / LLP/Govt. Sector Firm/others
6. PAN No.....GST No.....
Email
7. Phone Number: (Office)..... Mobile.....
8. Type of membership applied for (April to March)(a) (b) (c) (d) (Tick any one)
a) Life Membership Fee - ₹1,50,000/- + GST @ 18%
b) Regular Member Registration Fee - ₹ 5,000/- + GST @ 18% (One Time)
Annual Subscription & Renewal - ₹ 10,000/- + GST @ 18%
c) Per Additional Multi-location Laboratory Registration Fee - ₹ 2,500/- + GST @ 18%
d) Individual Membership Registration Fee - ₹ 2,000/- + GST @ 18% (One Time)
Annual Subscription & Renewal Fee - ₹ 2,000/- + GST @ 18%
9. DD / Cheque / NEFT No:.....Date.....
Bank Name.....Branch.....Amount ₹.....

I, as the competent authority, affirm that I am willing to join the Association of Indian Laboratories.

Date..... Name / Signature of Laboratory Representative.....

Please sent hard copy of: a. Copy of legal identity of lab b. 2 Passport size photographs c. Supporting document for Date of Establishment d. Company's brief profile e. Copy of GST Certificate

Account details of AOIL:

GST No : 06AADAA9863F1ZO
Account Name : Association of Indian Laboratories
Banker : ICICI Bank Ltd., Shop No. G1, Bestech Square Mall, Sector-57, Gurugram, Haryana-122002
Account No : 630301036487
IFSC Code : ICIC0001147

FOR AOIL USE ONLY

Clearance Date:Invoice No..... Membership No: AOIL/...../.....