



GRIHA Council Associate Membership Form

Members registering as Associate Members of GRIHA Council are kindly requested to fill in this form and return to Mr Ankit Bhalla, Manager, GRIHA Council at ankit.bhalla@grihaindia.org.

Organization

Name (spelled out):

Name (for display):

Headquarters (city, country):

Website:

Contact person:

Title:

First name:

Last name:

Position:

Postal address:

Zip Code:

City:

Country:

E-mail:

Telephone number:

Mobile:

Fax:

Alternate contact person:

Title:

First name:

Last name:

Position:

Postal address:

Zip Code:

City:

Country:

E-mail:

Telephone number:

Mobile:

Fax:

Our organization is:

Developer

Government or local authority agency (Public)

Research organization, university, school

International Not-for-profit (NGO)

National Not-for-profit (NGO)

International Company

National or Local Company

International Industry (material producers)

National or Local Industry (material producers)

Professional Association or Federation (including green building councils)

Other:

By signing and submitting this form to GRIHA Council we confirm our associate membership in GRIHA Council till _____. We also acknowledge the GRIHA Council Charter as the basis for GRIHA Council and its associate members.

Signed on [dd/mm/yyyy]

at [city, country]

[Name]

For our website and communication:

Organization Presentation (10 lines):

Your GRIHA Council vision (5 lines)

*You can provide a short statement about your relationship with GRIHA Council
(benefits, involvement, or activities)*

Please attach to your response e-mail your up-to-date **logo**, minimum 300dpi, for
upcoming publications/ website