



## SACHIN KUMAR CONCEPTS & HOSPITALITY PVT LTD

*Hospitality. Personified*

Estd. 2015

CIN: U74900UR2018PTC008804, PAN: ABACS4227R

TAN: MRTS15525G, DIN: 08150986

Regd. Off: 27 Araghar, 2nd Floor, Prem Complex, Haridwar Road, Dehradun 248001, Uttarakhand

Ph.: +91 7088493884 / 9205964548

Email: info@sachinkumarhospitality.com / director@sachinkumarhospitality.com

Website: www.sachinkumarhospitality.com

### MEMBERSHIP TYPE

For Office Use Only:  
SKC&HPL No:

## APPLICATION FORM 2018-19

PLATINUM – INR 6000 + 18% GST

SILVER – INR 3000 + 18% GST

INSTITUTE/COLLEGE - INR 10000 + 18% GST

GOLD INR 4000 + 18% GST

EMERGING TALENT – INR 3000 + 18% GST

BUSINESS LEAGUE – INR 10000 + 18% GST

Type of Membership (please tick)

- Platinum Membership       Gold Membership       Silver Membership  
 Emerging Talent Membership       Institute/College Membership       Business League Membership

Any Other ( Please specify) \_\_\_\_\_

I / We, wish to enrol for \_\_\_\_\_  
as Associate Member of Sachin Kumar Concepts & Hospitality Pvt Ltd.

Suffix (Mr/Ms/Mrs/Dr) \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Place of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

Number of Children: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ Pin Code \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ Pin Code \_\_\_\_\_ State \_\_\_\_\_

Telephone: [STD Code] \_\_\_\_\_ Landline No: \_\_\_\_\_

Mobile No: \_\_\_\_\_ Alternative No: \_\_\_\_\_

E-mail ID: \_\_\_\_\_ Website: \_\_\_\_\_

Current Organization: \_\_\_\_\_

Designation: \_\_\_\_\_

Location \_\_\_\_\_

Full Address of Organization: \_\_\_\_\_

Phone No: \_\_\_\_\_ Company Mob No: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Total Work Experience (in yrs.): \_\_\_\_\_ (India) \_\_\_\_\_ (Abroad) \_\_\_\_\_

Passport No: \_\_\_\_\_ Driving Licence No: \_\_\_\_\_

Adhaar Card No: \_\_\_\_\_ Voter Id No: \_\_\_\_\_

Pan Card No: \_\_\_\_\_

Highest Degree/Diploma/Certificate Name: \_\_\_\_\_

Name of Institute/College: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Year of Enrolment: \_\_\_\_\_ Year of Passing: \_\_\_\_\_

Grade/Total Mark/Percentage: \_\_\_\_\_

Major Subjects: \_\_\_\_\_ Minor Subjects: \_\_\_\_\_

Other Degree/Diploma/Certificate Name: \_\_\_\_\_

Name of Institute/College: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Year of Enrolment: \_\_\_\_\_ Year of Passing: \_\_\_\_\_

Grade/Total Mark/Percentage: \_\_\_\_\_

Major Subjects: \_\_\_\_\_ Minor Subjects: \_\_\_\_\_

Any International Degree/Diploma/Certificate: \_\_\_\_\_

Name of Institute/College: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Year of Enrolment: \_\_\_\_\_ Year of Passing: \_\_\_\_\_

Grade/Total Mark/Percentage: \_\_\_\_\_

Major Subjects: \_\_\_\_\_ Minor Subjects: \_\_\_\_\_

Hotels/Hospitality Companies you worked for:

1. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

2. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

3. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

4. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

5. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

6. Company Name: \_\_\_\_\_ From (year): \_\_\_\_\_ to \_\_\_\_\_

Social Media Connect:

Facebook: \_\_\_\_\_

LinkedIn: \_\_\_\_\_

Twitter: \_\_\_\_\_

Skype Id: \_\_\_\_\_

Awards if any:

\_\_\_\_\_  
\_\_\_\_\_

Membership of any other Organization/Institutions

Membership Name: \_\_\_\_\_

Membership No: \_\_\_\_\_ Started on: \_\_\_\_\_ Valid till: \_\_\_\_\_

We are enclosing a DD/Cheque for INR \_\_\_\_\_ in favour of "Sachin Kumar Concepts & Hospitality Pvt Ltd" payable at Dehradun

DD/Cheque No. \_\_\_\_\_ Dated \_\_\_\_\_

Bank Name & Branch \_\_\_\_\_

I / We agree to abide by the rules and regulations of Sachin Kumar Concepts & Hospitality Pvt Ltd. Membership program and company regulations.

I / We hereby acknowledge that the above information is true to the best of my knowledge and belief.

Signature: \_\_\_\_\_ (Authorized Signatory)

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Official seal of the establishment:

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For office use only:

Sachin Kumar Concepts & Hospitality Pvt Ltd Code: \_\_\_\_\_

ASSOCIATE MEMBERSHIP

Goods and Service Tax (GST) No.: \_\_\_\_\_

Permanent Account Number (PAN): \_\_\_\_\_

Legal Name of Business: \_\_\_\_\_

## Sachin Kumar Concepts & Hospitality Pvt Ltd

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