



**HOTEL AND
RESTAURANT
ASSOCIATION
(WESTERN INDIA)**

4, Candy House, Mandlik Road,
Colaba, Mumbai 400 001
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RENEWAL OF HOTEL MEMBERSHIP

FORM TO BE FILLED IN BLOCK (CAPITAL) LETTERS ONLY.

Date : _____

THE SAME SHOULD BE LEGIBLE.

Membership No.: _____

RENEWAL OF MEMBERSHIP FOR THE YEAR 2022 - 2023

- ◆ **1** Name of the Establishment: _____
Legal Name of the Establishment: _____
- ◆ **2** Enclosed Cheque / Demand Draft No. _____ Dated _____ for ₹ _____
Towards payment of the Annual Membership Subscription for the year _____ as per the subscription invoice received from the Association. **(Kindly share your UTR No. if payment done by RTGS/NEFT) ***
GST No. _____ (Kindly enclose a copy of the latest GST Challan)
- ◆ **3** Kindly note that there is no change in our address/or our communication address is as under : **(please tick)**
Address : _____
City : _____ State : _____ Pin Code : _____
Tel : _____ Mobile : _____ Fax : _____
Billing E-mail : _____ Web : _____
- ◆ **4** We request you to please send all circulars and emails to the following email Id's:*
 - Representative Name: _____ Designation: _____
E-mail: _____ Mob. No. : _____
 - General Manager Name: _____
E-mail: _____ Mob. No.: _____
 - Owner/Chairman Name: _____
E-mail: _____ Mob. No.: _____
- ◆ **5** Information required for use during Annual Elections:
Email Address: where election related information will be sent _____
Mobile Number: For receiving OTP: _____
- ◆ **6** Is The Hotel Classified by the Ministry of Tourism Yes / No Star Category _____
- ◆ **7** As on date the number of rooms in our Hotel comprise of: **Single** _____ **Double** _____ **Suite** _____ **Total** _____
- ◆ **8** As on date the seating capacity in our F & B Outlet comprise of: **Restaurant** _____ **Bar** _____ **Banquets** _____

We request that the Regional Membership Cards to be issued to the following representatives:

CARD HOLDER – 1:

CARD HOLDER – 2:

**Affix Photo
of Card
Holder**

Name : _____
Designation: _____
Mobile : _____

**Affix Photo
of Card
Holder**

Name : _____
Designation: _____
Mobile : _____

AUTHORISED SIGNATORY OF CARD HOLDER

AUTHORISED SIGNATORY OF CARD HOLDER

◆ **RUBBER STAMP OF THE ORGANIZATION ***

◆ **All Fields Compulsory.**

Thanking you,
Yours faithfully.