IAF-AB - INTERNATIONAL ACCREDITATION FEDERATION OF ACCREDITATION BODIES
RENEWAL FORM CATEGORY IAF-AB – Institutions/School/College/University

All prospective members of International Accreditation Federation of Accreditation Bodies (IAF-AB). is required to complete this registration form. Indicate any changes; Membership runs from round the year.☐NEW MEMBERSHIP ☐ RENEWAL ☐Changes for directory?

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	☐ Dr	☐ Mr	☐ Mrs	☐ Miss	☐ Prof	☐ Ms
Name of Individual						
Organization's Name						
Position/ Assignment				Work Phone (If Unique)		
Address 1				Principle Phone		
Address 2				Home Phone		
Town/City				Whatsapp		
Postal Division				Essential Email		
Country:				Auxiliary Email		

***Star the e-mail and phone number you would like listed in the directory**

SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
Provisional Accreditation Bodies	Admission Fee (One Time)	$2250	
Provisional Accreditation Bodies	Annual Fee (Every Year Would be Charged)	$500	
PER MANDAY RATE OF AUDIT(Separate Quotation Will Be Send)		$100 / Manday	
Payment mode	☐ Online Payment ☐ Pay Pal ☐ Western Union ☐ Others		

Paste a Passport Size Photo here

SECTION 3: MEMBER INFORMATION

OCCUPATION /INFORMATION/JOB TITLE:

Member **IAF-AB:** Yes☐ No ☐ Would you like to receive **IAF-AB** /It's Sister Organs membership information?: Yes☐ No ☐

Name of Registering Authority of your Institutions/School/College/University : **Registered on Dated:**

How many registered students in your Institutions/School/College/University :

What is your main objectives of your Institutions/School/College/University :

Please indicate if you would be willing to **serve on a chapter/committee etc.**:
☐ Yes ☐ Not at this time
Is there any interest specific area/committee you would like to serve on? _____
(Committees/Positions/IAF-AB / It's Sister Organs are listed at http://www.iaf-ab.org/IAF-AB sisterorgans.html)

Permission to use photographic images:
Photographs of IAF-AB members may be used in various IAF-AB communications incl. the newsletter and website. Group photographs taken at IAF-AB events may be used without identifying individual members. For individual photographs, please indicate your permission for use:
_____ IAF-AB /It's Sister Organs have my permission to use and identify photographs of me.
_____ IAF-AB /It's Sister Organs does not have permission to use and identify photographs of me.
_____ IAF-AB /It's Sister Organs must contact me before using any identified photographs of me in IAF-AB communications.

All disputes relating to membership, IAF-AB, services/privileges, issue of Identity Cards, Certificates and etc. are governed by Civil Laws and Civil Courts only subject to Mumbai,(India) Jurisdiction.
Declaration: I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We aware that I/We may be held liable for it. I/We hereby authorize sharing of the information furnished on this form with the **IAF-AB** .

Date:_____ **Signature:**_____

☐ **To pay online:** The Membership Fee in favor of "**IAF-AB**" or You can Transfer the Amount through Bank directly in A/C NO. 12950200000891, **Bank Name:** Indian Overseas Bank, Mumbai. **SWIFT Code:** IOBAINBB089.**Ifsc Code:**, IOBA 0001295 **Whatsapp. :** +91-8275879725

☐ Regardless of payment method used, please **form** to info@iaf-ab.org . fill your details in and **make sure to send a cop**-mail, which includes,name, address, tel, fax, **of your payment transfer receipt/**-mail and cellphone Number. Payment receive**-slip along with membership** will be updated at **IAF-AB** after 48 hrs.