

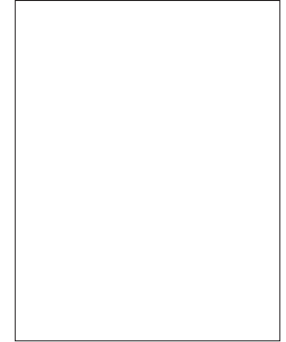


TAMIL FILM ACTIVE PRODUCERS ASSOCIATION

REGN NO: SRG/Chennai South/250/2020
(Registered under Tamil Nadu Societies Act, 1975)

Date: _____

Application No: _____



(Affix one Passport size photo of the producer)

To
The General Secretary,
Tamil Film Active Producers Association,
Chennai - 600087.

Sir,

Please enroll me as a member in the category as mentioned hereunder in the Tamil Film Active Producers Association (TFAPA). I hereby furnish all the relevant details/ documents necessary for enrolment.

I fully understand and agree that the admission for membership of TFAPA shall be in the sole discretion of the Management Team of TFAPA.

I therefore fully abide by the decision of Management Team for admission and shall abide by the decision that may be taken by the Management Team and, if I am admitted in the preferred membership category, further agree to abide by the Memorandum of Association and Rules and Regulations (Bye laws) of TFAPA.

Yours Faithfully

For

.....
(The Producer shall affix the seal with signature).

Primary Membership	
Associate Membership	
Probationary Membership	
Corporate Membership	

1. **NAME OF THE PRODUCER** : _____
(Admission shall be done in the name of the Producer and not in the company name)
2. **NAME OF THE FIRM/COMPANY** : _____
that Producer represents/holds ownership
3. **DESIGNATION** : _____
(Proprietor/Partner/ Managing partner/Director/
Managing Director/ Authorized Representative)
4. **ADDRESS** with for Correspondence : _____

5. **CONTACT DETAILS -**
- Land Line No : _____
- Mobile No : _____
- Email : _____
6. **APPLICATION FOR MEMBERSHIP** :
(Please Tick against the appropriate category)
- Primary Membership**
 - Associate Membership**
 - Probationary Membership**
 - Corporate Membership**
7. **FEES SUBMITTED FOR THE PREFERRED CATEGORY:**
- a. **Category of Membership** : _____
- b. **Entrance Fee** : _____
(Details of cheque/DD/Amount/Date)
(Refer the Instructions in Annexure)
- c. **Subscription Fee** : _____
(Details of cheque/DD/Amount/Date)
(Refer the Instructions in Annexure)

8. PRODUCER DETAILS

a. In the case of Partnership/Limited company:

Name of partners/Director (If Ltd company)

	Name	Designation
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

b. In case of Corporate Membership:

(The name of the Authorized Person)

	Name	Designation
1.	_____	_____

9. PROFESSIONAL DETAILS

A. Past performance with details of films produced (for Primary and Associate Producers category) :

	Title of the film	Language	Year of Release
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

B. For Probationary Members

- i. Name of the film/Language currently in production/or to be produced shortly : _____
- ii. Artiste/Technician details : _____
- iii. Shooting commenced/to commence : _____
- iv. Letter from Laboratory confirming the film in contract with them : _____

10. PROOF OF IDENTIFICATION SUBMITTED

- a. PAN CARD (Must submit) : _____
- b. Passport : _____
or
- c. Voters ID : _____
or
- d. Aadhar Card : _____

11. RECOMMENDATION FROM TWO MEMBERS (ONE OF THEM SHALL BE OFFICE - BEARER)

- A. 1. Name (Primary Member) : _____
- 2. Signature with Seal : _____
- B. 1. Name (Office-Bearer) : _____
- 2. Signature with Seal : _____



TAMIL FILM ACTIVE PRODUCERS ASSOCIATION

No.262-A, Indira Gandhi Road, Off: Kamarajar Salai, Ramakrishna Nagar,
Alwarthirunagar, Valasarawakkam, Chennai - 600 087. India.

Phone: 044-4269-6320 / E-Mail: tfapa2020@gmail.com