



**AUDIT BUREAU OF CIRCULATIONS**  
Wakefield House, Sprott Road, Ballard Estate, Mumbai- 400 001

**MEMBERSHIP APPLICATION FORM**

**PUBLISHER**

The Secretary General  
Audit Bureau Of Circulations  
Wakefield House, Ballard Estate,  
Sprott Road,  
Mumbai - 400 001

Place \_\_\_\_\_

Date \_\_\_\_\_

I/We, the undersigned, hereby apply to the Council of Management of Audit Bureau of Circulations for enrolment to membership of the Bureau.

I/We undertake to abide by the Memorandum and Articles of Association of the Company, and to observe the rules and regulations governing the working of the Bureau as laid down by the Council from time to time.

(The Audit Bureau of Circulations is a company limited by Guarantee and not having a share capital. The only possible financial liability attached to members, other than their entrance fee and annual subscription is one of not exceeding Rupees fifteen per member in the event of winding up of the Company.)

I/We further agree that in the event of any differences of disputes arising between me/we and the Bureau and / or its Council of Management at any time from the date of this application, whether during the period of my /our membership of the Bureau or after its cessation, these shall be subject to the jurisdiction of Courts in Mumbai only.

I/We declare that, according to the schedule of fees fixed by the Council of Management, from time to time the amount of my/ our Entrance fee is Rs. \_\_\_\_\_ and the amount of my /our Annual Subscription is Rs. \_\_\_\_\_

Cheque for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_) is enclosed.

Name of Publication \_\_\_\_\_

*Signed* \_\_\_\_\_  
( Please affix Rubber Stamp / Seal )

**For & on behalf of** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Proposed by** \_\_\_\_\_  
( Please affix Rubber Stamp / Seal )

**Seconded by** \_\_\_\_\_  
( Please affix Rubber Stamp / Seal )

**(To be proposed and seconded by any two members of the Bureau.)**



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**Permanent Information Form**  
(Publications)

Publication \_\_\_\_\_ Date of first issue \_\_\_\_\_  
[Pl. attach specimen copy of current issue]

Publishers \_\_\_\_\_

Proprietors \_\_\_\_\_

Printers \_\_\_\_\_

Printed and Published from \_\_\_\_\_

Address (Postal, E-mail and Telephone No.) \_\_\_\_\_

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

Nature of Publication \_\_\_\_\_

Frequency of issue \_\_\_\_\_ Claimed Circulation \_\_\_\_\_

Price \_\_\_\_\_ Language \_\_\_\_\_

RNI Registration No. \_\_\_\_\_ [please attach a copy of RNI Certificate]

Language in which the books of accounts and other records are maintained \_\_\_\_\_

Name & Address of Approved Auditors \_\_\_\_\_  
(From amongst the bureaus panel of approved auditors)

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

Name of all other publications printed and owned by the proprietors \_\_\_\_\_

\_\_\_\_\_

Branch Office(s) at \_\_\_\_\_

Does the Publisher-applicant belong to any other professional organisation(s) e.g. INS and or ILNA etc? if so, the name(s) of such organization(s) may please be stated \_\_\_\_\_

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

Name of Representative on the Bureau \_\_\_\_\_

Designation , Address & Tel. No. \_\_\_\_\_

Name of Mumbai Representative \_\_\_\_\_

Address & Tel. No. \_\_\_\_\_

**MECHANICAL DETAILS**

Size of the page \_\_\_\_\_ Number of Pages \_\_\_\_\_

Width of Column \_\_\_\_\_ Length of Column \_\_\_\_\_

Number of Columns per page \_\_\_\_\_

Type of paper used \_\_\_\_\_

Type of Printing Machine \_\_\_\_\_

Printing Capacity \_\_\_\_\_

Number of Rotary Printing Units \_\_\_\_\_

Capacity per Rotary Printing Unit \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_ For and on behalf of \_\_\_\_\_

Name & Designation \_\_\_\_\_

(Please affix Rubber Stamp/Seal)

(Please attached your current Advertising rate Card and a Specimen Copy of the Publication)

\_\_\_\_\_  
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