



HOTEL AND RESTAURANT ASSOCIATION OF NORTHERN INDIA

CIN No.: U55101DL1952PLC002161

REG. OFF. : 406/75-76, MANISHA BUILDING, NEHRU PLACE, NEW DELHI - 110019

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AUTHORISED SIGNATORY FORM

HOTEL ()

RESTAURANT ()

HRANI Membership No. : _____

Date : _____

Name of Unit : _____

Location of Unit : _____

We, being a Member of Hotel And Restaurant Association of Northern India (HRANI) request you to record the latest mail id and correspondence address for all future correspondence with HRANI. I hereby also declare that the person, whose particulars are given below, is a duly authorised person to cast vote at all General Meetings of HRANI through electronic mode / e-voting by using the email ID mentioned below.

AUTH. SIGNATORY-CUM-VOTER	
<div style="border: 1px solid black; width: 150px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">Affix Stamp-Size Photograph here</div>	
Please fill all the details in capital letters only	
Name of Authorised Person :	
Designation :	
Mobile :	Landline :
E-mail :	
Correspondence Address :	
Specimen Signature :	

Name: _____

Designation: _____

Signature : _____

(with Rubber Stamp)

Note :

1. The Members are requested to notify to the Secretariat change in the particulars of the Authorised signatory, if any, ever.
2. Discount Cards of HRANI & FHRAI will be issued after the receipt of the form duly properly filled in and signed.