

Date : \_\_\_\_

# **HOTEL AND RESTAURANT ASSOCIATION OF NORTHERN INDIA**

CIN No.: U55101DL1952NPL002161

REG. OFF.: 406/75-76, MANISHA BUILDING, NEHRU PLACE, NEW DELHI - 110019 TELEPHONE: 011-41306628, 42804416 E-mail: hrani.1950@gmail.com, Website: www.hrani.net.in

#### **LISTING DETAILS - HOTEL CATEGORY**

y and enclose the copy  5 Star  2 Star  PIN Code  gnatory who will e	of latest certificate of cl  Heritage  1 Star  Tel.: (STD 0  Website:	assification from Mo	OT)  ar  lassified
y and enclose the copy  5 Star  2 Star  PIN Code  gnatory who will e	of latest certificate of cl  Heritage  1 Star  Tel.: (STD 0	assification from Mo	OT)  ar  lassified
5 Star 2 Star PIN Code	Heritage  1 Star  Tel.: (STD 0	4 St Unc	lassified
2 Star PIN Code	1 Star Tel.: (STD 0	Unc	lassified
_ PIN Codegnatory who will e	Tel.: (STD (	Code	]
PIN Code	Tel.: (STD (	Code	
gnatory who will e	Website :		
gnatory who will e			
	exercise right of Me	embership	
		•	
Design	nation	(M):	
/Hotel Manager			
tion:			
ort <b>ii)</b> kms. fro	om Railway Station <b>iii</b>	)kms.fro	om Main Bustand
	11. Che	ck Out Time:	
(Single	Double	Suites	)
	13. F & B Fa	<b>icilities :</b> No. of F	Restaurant
		•	·
		-	
		<b>&gt;</b> i	
HRAI ( ) / Other(s	)		(Please Specify)
	tion:   ort ii) kms. fro  (Single a Capacity % on rooms % on India		(Single Double Suites



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### **AUTHORISED SIGNATORY FORM**

HOTEL ( )				RESTAURANT ( )
HRANI Membership No	.:		Da	ate :
Name of Unit:				
Location of Unit:				
latest email id and cor the person, whose par	respondence addres ticulars are given be	rant Association of Northern as for all future correspondence elow, is a duly authorised pers by using the email ID mention	ce with HRANI.	I hereby also declare that
	AUTH. SIGNATORY-CUM-VOTER		R	
	Please fil  Name of Authorise  Designation :  Mobile :	Affix Stamp-Size Photograph here  Il all the details in capital letters ed Person:  Landline:	only	
	E-mail :			
	Correspondence A	ddress :		
	Specimen Signatu	re :		
			Name: _	
			Designation	on:
			Mobile No	.:
(with Rubber Stamp)				
(with vanner Stailib)			Signaturo	

#### Note:

The Members are requested to notify to the Secretariat change in the particulars of the Authorised signatory, if

Signature: \_\_\_

- 2. Discount Cards of HRANI & FHRAI will only be issued after the receipt of this form duly properly filled in and signed on letter head by authorised signatory registered with HRANI.
- 3. All fields are mandatory to be filled for registration.



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### **NOMINATION FORM FOR DISCOUNT CARD**

HOTEL ( )		RESTAURANT ( )
HRANI Membership No. :		Date :
Name of Hotel / Restaurant :		
Address :		
CityF	PIN Code	State
One naint contact for Finan	/ A	Danautwant
One point contact for Finan	-	•
vame :	Designation :	
Mobile :	E-mail :	
Note: Please paste photographs inside the bo	ox for the discount card	S.
NOMINEE: 1		NOMINEE: 2
Please paste photograph of Nominee: 1 in his space  Please write in capital letters only		Please paste photograph of Nominee: 2 in his space  Please write in capital letters only
Name :		Name :
Designation:		Designation :
Mobile :		Mobile :
E-mail :		E-mail :
Signature :		Signature :
I verify that the above two people are ent	itled to discount cards	of HRANI
,		
Stamp of Company		Signatures (Authorised Signatory as per HRANI records)
		Name:
		Designation:
		Mobile:
		E marile

<sup>\*</sup>Please ensure to get this form signed and verified only by the authorized Signatory as submitted to HRANI else the cards will not be processed.