



# Federation of Hotel & Restaurant Associations of India

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## RESTAURANT MEMBERSHIP

### APPLICATION FORM

Please make 3 copies. Forward 2 signed copies with a covering letter on your letterhead, along with D.D. of the requisite amount, through the Regional Association. One copy may be retained by you for your records.

For office use only:

Membership No.....  
Bill Status:.....  
Discount Cards:.....  
Enclosure:.....

### FHRAI MEMBERSHIP ELIGIBILITY CRITERIA

1. Must be a member of one of our Regional Associations. Please send this application through it. (You can also apply for membership of RA and FHRAI simultaneously)
2. Must be a functioning restaurant.
3. Must have minimum 25 seats.
4. Must have all the relevant Municipal/Police or any other required licenses with current validity.
5. A Restaurant within the hotel (who is FHRAI member) can also apply for separate membership (except in the Western Region). This is allowed for one restaurant for a hotel with 25-100 rooms & two restaurants for hotels with above 101 rooms. Such restaurant members are also entitled to 2 FHRAI discount cards.
6. Please send enclosed listing proforma along with this application for publication in Hotel & Restaurant Guide India.

1. We wish to enrol our Restaurant: \_\_\_\_\_  
(give name of the Restaurant not of the company)  
which is at (give full address) \_\_\_\_\_  
City \_\_\_\_\_ Pin Code \_\_\_\_\_ State: \_\_\_\_\_  
Telephone : [STD Code \_\_\_\_\_ ] \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail : \_\_\_\_\_ Website : \_\_\_\_\_  
as Individual Member of the Federation of Hotel & Restaurant Associations of India.
2. We are a member of or have applied for membership of (name the Regional Association)  
\_\_\_\_\_
3. Name & Designation of the Chief Executive/Owner: \_\_\_\_\_
4. Name & Designation of Incharge Manager: \_\_\_\_\_
5. We have \_\_\_\_\_ total number of seats. Cuisine \_\_\_\_\_
6. Mention names & addresses, phone/fax nos. of your State/City Hotel/Restaurant Associations of which you are a member  
State Association \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
City Association \_\_\_\_\_ Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

7. We agree to abide by the rules and regulations of the Federation.
8. We are enclosing a D.D for Rs. \_\_\_\_\_ in favour of “FHRAI” payable at New Delhi.  
D.D No. \_\_\_\_\_ dated \_\_\_\_\_ Bank name & branch \_\_\_\_\_  
This amount being the Entrance Fee of Rs. \_\_\_\_\_ Annual Membership Fee of Rs. \_\_\_\_\_  
Legal Fund Fee of Rs. \_\_\_\_\_ Listing Fee Rs. \_\_\_\_\_
9. Please place our application before the Executive Committee of the Federation for approval. After membership of our Restaurant has been approved, issue Membership Discount Cards to our following nominees. **Two stamp size (31 mm x 28 mm) photographs of each nominee are enclosed for this purpose** (Please write name of the person on the back of photograph).
1. Name \_\_\_\_\_ Designation \_\_\_\_\_
2. Name \_\_\_\_\_ Designation \_\_\_\_\_

Certified that the above information is true and correct to the best of my knowledge.

**To be filled by Regional Association**

Certified that the above applicant is a Member of this Association

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

Seal of Regional Association

**Signature** \_\_\_\_\_

**Designation** \_\_\_\_\_

**Official seal of the establishment:**

**RESTAURANT MEMBERSHIP FEE PAYABLE FOR THE YEAR 2010 - 2011**

	ANNUAL MEMBERSHIP FEE (IN RUPEES)			
	up to 100 Seats	101-150 Seats	151-200 Seats	More than 200 Seats
Entrance Fee (one time)	5850	5850	5850	5850
Annual Subscription Fee	3225	4015	4830	5645
Annual Legal Fund Fee	325	400	485	565
Annual Listing Fee	2255	2575	2905	2905
<b>Grand Total</b>	11655	12840	14070	14965

- Entrance Fee is payable only once at the time of enrolment.
- Membership dues (revised if any) are to be paid every year which are valid from April to March. All Discount Cards are issued from July to June of next year.