



Membership Form

(Free Membership only for 10,000 Air Shippers)

Industry: _____
(Shippers, Airlines, Airports, Logistics Service Providers & Others)

Category: _____
(Pharmaceuticals, Perishables, Apparel, Gem & Jewellery, Leather, Engineering, Oil & Gas, Electronics & Computers, Project Cargo, Sports Goods, Aerospace & MRO Medical Equipments & Others)

Company Name: _____

Name: _____

Designation / Job Title: _____

Email ID (Official): _____

Website: _____

Email ID (Personal): _____

Mobile No.: _____

Contact No.: _____

Address: _____

Country: _____

State: _____

City / Zipcode: _____ / _____

Place / Date: _____ / _____

For Office Use: _____

For Online Registration please visit at <http://www.i-asa.org/members>