WIRC - BFSI & CAPITAL MARKETS STUDY GROUP

Enrolment Form - Resource Person / Member Information

Affix Latest

Colour Photo

I.C.A.I. Membership No :	E-mail	
Correspondence Address :		
	City	Pin code
Tel. No. : Cell: _	Office:	Residence:
Date of Birth: / /	Blood Group	
Occupation: Service Practice B	usiness. Frm/Company's Name:	
Company/ Firm name & Designation.	(Kindly attach your visiting card)	
	Drawn on	
Areas of interest in "BFSI & CAPIT	TAL MARKETS" (Please Tick.√)	
□ Banking	☐ Financial Services	☐ Insurance
☐ Capital markets	☐ Corporate Finance	☐ Merchant Banking
☐ Private Equity	☐ Real Estate Funds &REIT	☐ Mutual Funds
☐ Brokerage/ Advisory	☐ Wealth Management	☐ Portfolio Management
☐ Equity Research	☐ Debt Market	☐ Commodities
☐ External Borrowings	□ Forex	☐ Risk Management
☐ Corporate Governance	☐ Market Regulations	☐ Investor Protection
Any other relevant area of inte	rest (Please specify)	
	Think Tank Pioneering Initiatives – I	
	ndtable / work on any allotted projects l dies / Case Studies/Social Media etc	
Suggestions : (On venue, day & tim	e for meetings)	
Signature :		