



ENROLLMENT FORM

INDIA GREEN MANUFACTURING CHALLENGE 2025

INTERNATIONAL RESEARCH INSTITUTE FOR MANUFACTURING®, INDIA

Name of the Company _____

Plant Address _____

Phone _____ Plant Name _____

City _____ State _____ PIN Code _____

INFORMATION OF AUTHORIZING PERSON

Name _____ Designation _____

Mailing Address _____

Phone _____ E-mail _____ Mobile _____

INFORMATION OF LIAISON PERSON

Name _____ Designation _____

Mailing Address _____

Phone _____ E-mail _____ Mobile _____

CATEGORICAL INFORMATION

Products Manufactured _____

Sales Turnover _____ Number of Employees _____ Age of Facility _____

APPLICATION FOR SAFETY FIRST FACTORY PROGRAM ☐ YES ☐ NO

BILLING INFORMATION	
Enclosed Cheque or DD Number:	
Bank Name	
Amount	
DRAWN IN FAVOUR OF "INTERNATIONAL RESEARCH INSTITUTE FOR MANUFACTURING PVT LTD"	

The duly filled application form with the Cheque/DD should be mailed to:

International Research Institute for Manufacturing

7th Floor, Vatika Business Centre,
Wing-B, Supreme Business Park,
Hiranandani Gardens, Powai,
Mumbai - 400 076
Ph: +91 22 42389281

MEDIA PARTNER



DECLARATION

I agree, on behalf of my Organization, to abide by the rules of India Green Manufacturing Challenge competition and accept that the decisions of the International Research Institute for Manufacturing are final. I confirm that my Organization is eligible to take part in this competition and that all information shared in this regard is correct. I accept that, we would bare the assessment charges and expenses* as mentioned in the brochure.

Signature of Authorising Person: _____ Date: _____

Signature of Liaison Person : _____ Date: _____

***Note:** Enrollment and Assessment Charges for each category is given in the brochure. Actual expenditure on Travel, Boarding and Lodging, other Incidental Expenses, incurred by the Assessors in connection with the Onsite Assessment is also to be borne by the Organization