

"BHARAT MATA KI JAI"

Vande Matram Social Welfare Association (Regd.)

Plot No. 25, Wazirpur Indl. Area, Delhi - 110052, Ph.: 011-27371920, 7827841084
E-mail : vandematramsocialwelfare@gmail.com,
Website : www.vandematramsocialwelfareassociation.com



MEMBERSHIP APPLICATION FORM

Affix a Passport
Size Photo
Self Attested

1. Name of the Applicant

2. Address

Phone Cell

Valid Aadhar ID

E-mail

Website

3. Country 4. State

Wish to enlist myself/ourselves as member of the Association in the following category. Please (✓) tick the appropriate box.

Member Life Member Associate Member Other

Specified as

5. I/We have read the aims of the Association and agree to abide by its constitutions, rules & regulation in force from time to time (Memorandum & Article of Association).

I am / we are a / an Individual Prop. Firm Partnership Firm Pvt. Ltd. Co. Ltd. Co. Please (✓) tick the appropriate box.

Date of Birth (In case of individual)

Date of Establishment (In case of non-individual)

6. I/We understand that my /our membership is subject to approved by the Managing Committee / Executive body of the Association

7. As per rules & regulations of the Association, My / our name has been proposed and seconded by the following two existing and valid members of the Association.

Proposed by: (Name) Seconded (Name)

Address _____ Address _____

Membership No. Membership No.

Signature _____ Signature _____

8. I am / We are remitting Rs. _____ (Rupees _____) being admission fee of Rs. _____ together with one year subscription of Rs. _____ for the year. _____ vide Cash / Cheque No. _____ Dated _____ Drawn on _____ in favour of "vandematram social welfare association"

I agree to work for the betterment of my nation and will work with all my heart.

Signature of the Applicant _____ Name _____

For Association Office Use only

Membership Application Form was put up in the Executive / Managing Committee Meeting dated _____ and Approved / not Approved

Signature of the Secretary General / Auth. Signatory