

ಸಾಂದ್ಯಾಪಣಾಕ್ ಅರ್ಜಿ / Application for Membership

1. Name ನಾಂವ್ :
2. Date of Birth ಜನಮ್ ತಾರೀಕ್ :
3. Married/ Not Married ಕಾಜಾರಿ/ಅಂಕ್ವಾರ್ :
4. If married, Date of Marriage :
ಕಾಜಾರಿ ತರ್, ಕಾಜಾರಾಚಿ ತಾರೀಕ್
5. Occupation ಕಾಮ್ / Business ಉದ್ಯಮ್ :
6. Office Address / ದಪ್ಪರಾಚೊ ವಿಳಾಸ್ :
.....
..... Phone
7. Residential Address ವಿಳಾಸ್ :
(Please give full postal address)
..... Phone
8. Mobile :
E-mail ID :
9. **Family Members ಕುಟ್ಮಾಚಿ ಸಾಂದೆ**

Members ಸಾಂದೆ	Name / ನಾಂವ್	D.O.B / ಜನನ್ ತಾರೀಕ್	M/F ಚಲೊ/ಚಲಿ
Spouse ಪತಿ /ಪತಿಣ್			
Children ಭುರ್ಗಿಂ	1.		
	2.		
	3.		
	4.		

Introduced & Recommended by:

Name ನಾಂವ್ :

Signature ದಸ್ಕತ್ :

Address ವಿಳಾಸ್ :

Place: _____ Date: _____

Signature of the Applicant
ಅರ್ಜಿದಾರಾಚಿ ದಸ್ಕತ್

Membership Fees / ಸಂದ್ಯಾಪಣಾಕ್ ಶುಲ್ಕ್		
1. Ordinary Life Membership	:	₹ 1000/-
2. Donor Membership	:	₹ 3000/-
3. Patron Membership	:	₹ 5000/-

For Office Use / ಆಡಳ್ತ್ಯಾ ಖಾತಿರ್

Date:

Received Rs.....(Rupees.....only)

by Cash / Cheque no.....dated..... vide Receipt No.....dated.....

Approved in the Managing committee Meeting held on.....