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**Estd. 2017 ( New Delhi. India)**

Regd. Under Societies Registration Act XXI of 1860 No. S/RS/DW(SW)/53/2017.  
Regd. Office: WZ-109, Street No. 1, Sadh Nagar, Palam Colony, New Delhi – 110045.  
E-mail: jamunafoundation@gmail.com

2 Photographs

Paste one photo  
with cross signature  
and one photo  
attach with this  
form

Sl.No. ....

## **MEMBERSHIP APPLICATION FORM**

I am desirous of enrolling myself as a General Member/Life Member of the Jamuna Foundation of New Delhi, India. I have full faith in the ideal of the activities of the Jamuna Foundation and paying/sending an amount of Rs. 1100.00 (one Thousand One Hundred) in cash/cheque, which is the Admission fee ( Rs. 500.00) including one year subscription ( monthly Rs. 50.00) for the said General Membership or Rs. 5,000.00 ( Five Thousand) for the side life Membership of the Jamuna Foundation. Therefore following particulars in support of my application.

1. Name of Applicant :-----
2. Name of Father/Husband :-----
3. Date of Birth :-----
4. Education :-----
5. Profession :-----
6. Permanent Address :-----  
-----
7. Present Address :-----  
-----
8. Phone No & Email ID :-----
9. Name & Signature of Referrer :-----
10. Address of Referrer :-----

*\*Please attached copy of residential proof & Photo ID ( PAN/ Aadhar Card).*

### **Declaration**

I declare that my particulars mentioned above are correct and undertake to abide by the Rules and Regulations of the Jamuna Foundation, New Delhi, India.

Date:-----

Signature of Applicant

### **For office use only**

Category of Membership: General Member/Life Member.

General/Life Membership No..... Membership fee paid an amount of Rs. ....  
Amount (inwords).....

By Cash/Cheque/DD No:..... Name of Bank:.....

Branch:..... Receipt No. .... Date .....

Recommended by: Ven./Mr./Ms. .... Membership No. ....

Date of Approval: ..... Approved in General/Executive Committee Meeting.

Name of office bearer: ..... Signature .....

Designation of officer bearer .....

Date : .....

Office Seal