NAIR SEVA SANGHA KARNATAKA (NSSK) Regd.

ADMIN OFFICE : No. 361, 11th Cross, 4th Main, 2nd Block, R.T. Nagar, Bangalore - 560 032 Tel +91 80 23330223, 41134841

MEMBERSHIP APPLICATION

(PLEASE FILL UP THE APPLICATION PREFERABLY IN BALL POINT PEN AND LETTER WITHOUT OVERWRITING)

PATRON ☐ DONOR MEMBER ☐ LIFEMEBER ☐

TITLE

Ms. | Mrs. | Mr. | Dr.

NAME OF THE APPLICANT

AGE (YRS) ☐☐ DATE OF BIRTH ☐☐☐☐☐☐☐☐ BLOOD GROUP ☐☐

NAME OF FATHER/HUSBAND /GUARDIAN

PRESENT RESIDENTIAL ADDRESS

PIN ☐☐☐☐☐☐

PHONE NO WITH STD CODE

MOBILE NO.

EMAIL ID (Write in Capital letters only)

NATIVE ADDRESS

PIN ☐☐☐☐☐☐

PHONE NO WITH STD CODE

MOBILE NO.

IN CASE OF ANY EMERGENCY CONTACT : NAME :
PHONE NO & EMAIL (CAPITAL LETTERS)

QUALIFICATION

OCCUPATION (SPECIFY)

BUSINESS ☐ SELF EMPLOYED ☐ EMPLOYED ☐

OFFICE ADDRESS

PIN ☐☐☐☐☐☐

PHONE NO WITH STD CODE

MOBILE NO.

EMAIL ID / WEB ADDRESS

FAMILY MEMBERS

SL NO.	NAME	RELATIONSHIP	AGE/DOB	BLOOD GROUP	QUALIFICATION

RELIGION	HINDU	CASTE	NAIR	SPECIFY SECT.

SPECIFY YOUR ACTIVITIES/HOBBIES

1

2

3

WRITE IN BRIFF ABOUT YOUR SELF & YOUR VISION

WRITE IN BRIFF ABOUT YOUR SPECIAL CONTRIBUTION/ACHIEVENANET IN ANY PARTICULAR FIELD AND AWARDS/ RECOGNITIONS ANY IN STATE /NATIONAL/INTERNATIONAL LEVEL

DECLARATION

I.....HEREBY DECLARE THAT INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KWLEDGE AND SOLEMNLY DECLARE THAT I SHALL BE AN ACTIVE MEMEBER OF THE SOCIETY AND ABIDE BY THE RULES AND REGULATION I FURTHER DECLARE THAT I AM NAIR BIRTH AND IA ALSO AWARE THAT IAM LIABLE FOR REMOVAL OF MY MEMBERSHIP IN CASE ANY OF THE INFORMATION FURNISHED HEREIN IS FOUND TO BE INCORRECT OR FALSE AT A LATER DATE

PROPOSED BY .....MEMBERSHIP NO.

SECONDED BY..... MEMBERSHIP NO.

DATE OF APPLICATION .....PLACE .....SIGNATURE OF APPLICANT.....

FOR OFFICE USE ONLY

NAME OF THE
APPLICATION RECEIPT DATE & NO.
APPROVED / DISAPPROVED & REASON FOR DISAPPROVED

.....

APPROVED MEMBERSHIP NO.

RECEIVED RS .....(RUPEES IN WORDS.....

BY CASH / CHQUE / DD NO.....DRAWN ON .....DATE.....

TREASURER SECRETARY PRESIDENT