

SILVER FOUNDATION

MEMBERSHIP FORM

Name :

Age :

Address :

Membership	Sponsor Member	(Rs. 25000/-)	<input type="checkbox"/>
	Patron Member	(Rs. 10000/-)	<input type="checkbox"/>
	Trustee Member	(Rs. 5000/-)	<input type="checkbox"/>
	Ordinary Member	(Rs. 1000/-)	<input type="checkbox"/>
	Voluntary Member	(Rs. 100/-)	<input type="checkbox"/>

(Put 4 mark wherever applicable)

Phone No. Land Phone :

Mobile :

DECLARATION

I hereby declare that I shall abide by the rules and regulations (bye laws) of the **SILVER FOUNDATION** amended from time to time.

Place :

Signature :

Date:

Name :

For Office Use:

Membership No.

Amount remitted

Receipt No. issued and Date

Sponsor Member
Patron Member
Trustee Member
Ordinary Member
Voluntary Member

Cash/Cheque/DD No:

Chairman

Secretary

Treasurer