

APPLICATION FOR MEMBERSHIP - Year 2023-24

To,
The Chairman
Sarathi Socio-Cultural Trust, Bangalore.

I, Shri/Smt wish to enroll as a **MEMBER** of Sarathi Socio Cultural Trust (Regd.), Bangalore.

I understand that my application for membership is **subject to approval by the Board of Trustees**.

My subscription of **Rs. 6000 /2000 (Student Only)** by way of Cheque No. Dated Drawn on Bank payable at Bangalore is enclosed.

My personal information is given below for your records.

Member Details:

Full Name			
Postal Address			
Email ID 1			
Email ID 2			
Mobile No. 1		Mobile No. 2	
Landline No. 1		Landline No. 2	

Family Details:

Spouse's Name	
Child(s) Names	
Parents' Names	

I agree to abide by the constitution of the Trust and any amendment thereof.

Yours sincerely,

Signature:

Name:

Date:

For Office Use:

Recommended by	
Approved on	
Membership No.	