

Membership Form

The President / Gen. Secretary,
Navdristi Social & Blind Welfare Society (REGD.)
F-9, Khasra No.18/4 Near Gurudwara Rama Vihar, Delhi-81
+91-8010453152, 9717188777, 9811142053, 8826387301, 9810187118
E-mail: sewa@navdristi.org,navdristiashram@gmail.com

Dear Sir,

I want to become Trustee / Life Time/ Monthly/ Life Time Food Member of ' Navdristi Social & Blind Welfare Society (Regd.). I have read the rules and regulations of the society and I undertake to abide by the same and I shall actively participate in the programs of the society. Please enroll me as a Trustee / Life Time/ Monthly/ Life Time Food Member of the society. My personal details are as under :

Name : Mr. / Ms. / Mrs. _____

Date of Birth _____ Date of Marriage _____

Father's / Husband's Name _____

Res. Address _____

Res.Phone : _____ Mobile : _____

Occupation : _____

Office Address: _____

Office Phone : _____

- Room Donor :- **Rs.1, 25,000/-**
- Trustee :- **Rs. 51,000/-**
- Life Time Membership :- **Rs.15000/-**
- Life time Food Donor :- (One day one time whole life) **Rs.21,000/-** or **25000/-**
- Monthly Donor: Mini. :- **Rs.1000/-**
- Other Donors : - One Day OneTime (Normal food) **Rs.2100/-** (Special food)
Rs.3100/-

Date : _____

Signature : _____

For Official Use Only

Received Membership fees Rs. _____ (in words) _____
_____ by Cash / Cheque No. _____

Drawn on bank _____

President

Gen. Secretary

Note: Cheques to be drawn in favour of **'Navdristi Social & Blind Welfare Society (Regd.)'**