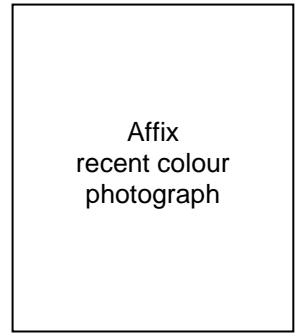




# Membership Form



To  
The Secretary,  
YOU AND I FOUNDATION HOOGHLY,  
26, Mearber Road, Chinsurah-712101,  
District-Hooghly West Bengal

Sir,

I hereby apply for the membership of YOU AND I FOUNDATION HOOGHLY in accordance with the membership terms and conditions. I request you to accept my application for membership.

1. Name (Block letters):

2. Name of Guardian/Husband/Spouse:

3. Address:

4. Date of Birth:

5. Contact Landline:

Mobile:

Email:

6. Educational Qualification:

7. Other Qualification if any:

8. Occupation:

9. Category of Membership: General / Student / Life Member/Corporate/ Patron/ Honorary

10. Membership Contribution: Rs ..... Subscription paid by: Cash/ Cheque/ Bank Draft

Life member: Rs.10000/-, Corporate: Rs 50000/-, Patron: Rs.1 lac,

Annual contribution Rs 200/- for General Members & Rs 100/- for Student Members,

Attention: Subscription paid by Cash only for student membership & general member. Payment must be a Cheque or Bank Draft made in favour of YOU AND I FOUNDATION HOOGHLY payable at Chinsurah

Requirement for membership: (I) One passport size photos (ii) Copy of Aadhaar Card /Voter ID Card /Passport.

## Declaration

I have read and understood the objectives and rules of the society and intend to join the organization voluntarily. I also hereby undertake to abide by all rules & regulations of the Society as are applicable from time to time and shall not indulge in any activity directly or indirectly which is detrimental to the aims and objectives of the Society in any manner. Any activity undertaken by the applicant, as a member of the Society shall be at his own risk and no compensation can be claimed for any harm caused to him in any manner during performing any of the activities of the society. I also undertake that the information furnished above is true to the best of my knowledge and belief.

Date:

Signature of Applicant

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## For office only

Membership No.:

Type of Membership:

Joining Date:

Amount:

Subscription paid by: Cash/ Cheque/ Bank Draft

Cheque/Bank Draft No:

Date:

Bank:

Branch:

Recommending Member's Signature

Signature of Treasurer

Signature of Secretary

