



SOOD SABHA DELHI NCR (REGD)

Registration No: S/ND/943/2018

Regd. Off.: A-403, Somdutt Chambers-1, 5 Bhikaji Cama Place, New Delhi - 110 066
Telefax: 011-26195005 | Email: soodsabhadelhinrcr@gmail.com

Form No. _____

Dated _____

The President
Sood Sabha Delhi NCR (Regd.)
Delhi

Dear Sir,

SUBJECT : APPLICATION FOR ANNUAL MEMBERSHIP

I am interested to become the Member of Sood Sabha Delhi NCR and agree to pay the annual subscription of Rs. 1,000/- and One Time Registration Fees of Rs. 100/-. Further given below are my particulars/details in brief for your consideration and approval:-

- (1) Name _____ (Gotra _____)
- (2) Spouse Name _____
- (3) Date of Birth _____ & _____
- (4) Anniversary Date _____
- (5) Father's Name _____
- (6) Children *Name(s) _____ Date of Birth _____
_____ Date of Birth _____
- (7) Married Yes/No
- (8) Phone No. (R) _____ (O) _____
- (9) Mobile No. _____ E-mail _____
- (10) Permanent Address _____

- (11) Profession _____
- (12) Office Business Address _____
- (13) Involved in my other social activity such as _____

Our Community has a high sense of dignity, duty and service to the Society. I assure you to extend whole hearted support to the Sabha in its endeavour to achieve the objectives.

Thanking You,

Yours faithfully,

Date _____

Address _____

*In case the number of children is more please attach a separate sheet.