

# MEMBERSHIP FORM

(Sole/Joint Members)

The secretary,  
**Samadhan Social Welfare Society**  
Head Office - SAMADHAN HOUSE, Plot No. 370,  
C-Block, MBR Enclave, (Near Sector-21 Metro Station),  
Opp. Ranjit Vihar-II, Sector-23, Dwarka, New Delhi-110075

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Sir,

Please enroll me/us as member/Joint members of Samadhan Social Welfare Society. I/We have read the rules and regulation/bye-laws of the society and I/We agree to abide by them.

	SOLE/FIRST APPLICANT	JOINT APPLICANT
Name		
Father's/Husband Name		
Date Of Birth		
Residential Status	Resident / NRI	Resident / NRI
Pan Card No.		
Voter/Aadhar Card/ No.		
Mailing Address		
Permanent Address		
Phone Nos.		
Email Id		
Profession		
Office Address and Telephone Nos.		
Nominee Name		
Relationship		
DOB / Age		
Address and Telephone Nos.		

## **TERMS & CONDITIONS**

- (a) Incomplete Form will be rejected.
- (b) Payment receipt along with welcome/ acknowledgment letter will be sent on realisation of cheque / pay order.
- (c) Part payment of membership fee is not acceptable.
- (d) The society reserves the right to cancel the membership of member who fails to make subsequent payments as per schedule decided by the society.
- (e) The member will have right to transfer the membership at any given point to time. There will be no administration charges for the transfer of membership. However, administrative charge of Rs. 25,000/- (Twenty five thousands only) will be applicable from second transfer onwards. The request for transfer will be accepted after the member completes necessary formalities.
- (f) Society reserves the right to cancel the membership of the person, who provides the false information in membership form or any other documents.
- (g) Separate "Application form" is to be filled and submitted to the society for housing scheme.
- (h) Surrender of membership can be made by a written application anytime before the payment of 'Earnest money'. In such case the share money will be refunded.

I/We remit herewith a sum of Rs. \_\_\_\_\_ Rupees \_\_\_\_\_ only

By cheque /Bank Draft/Pay order No \_\_\_\_\_ Dated \_\_\_\_\_

Drawn on \_\_\_\_\_ Bank as membership amount in favour of

**"SAMADHAN SOCIAL WELFARE SOCIETY"**

- I/We declare that the particulars given here in above are true and correct to my/our knowledge.

**Signature of First/Sole Applicant** \_\_\_\_\_

**Signature of Co-applicant** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Place:** \_\_\_\_\_

### **FOR OFFICE USE ONLY**

Membership approved in the management committee's meeting dated \_\_\_\_\_ Vide Resolution

No. \_\_\_\_\_ and recorded in the Membership Register on page no. \_\_\_\_\_

**President / vice president**

**Secretary**

**Branch Office:** Plot No 31, 2nd Floor, Sai Enclave,  
Near PF Office, Sector 23, Dwarka, New Delhi 110075