



MANAV VIKASH ASHRAM

(A Public Charitable Organization)

Registered Address: BH-97, Majherpara, Krishnapur, Kolkata-700 102

Contact: +91-94334 34029 / +91-89813 95936

Email: manavvikashashram@gmail.com / Web: www.manavvikashashram.org

Paste stamp
size
photograph

MEMBERSHIP FORM

Name (BLOCK LETTER): _____

Father's Name / Guardian's Name: _____

Address: _____

Date of Birth: _____ Age: _____ Blood Group: _____

Contact No: _____ WhatsApp No: _____ Email ID: _____

Hobby: _____ Occupation: _____

◆ Reason for joining with Manav Vikash Ashram: _____

Life Time Membership (Donation above 10,000/-) Gold membership (10 years)

Renewal membership Non-renewal general membership (5 years)

I certified that the particulars given above by me are correct in every respect.

Place: _____

Date: _____

[Enrollment ID : _____ (For Office Use)]

Signature

[Enrollment ID: _____ (For Office Use)]

Please submit your 1 copy photo & photocopy of ID proof along with the membership form.

Signature of the Introducer

[Membership ID: _____ (For Office Use)]

Authorized Stamp with Signature