## **Membership Form**

## RESIDENTS WELFARE ASSOCIATION

## BSNL Colony, Kalibari Marg, New Delhi - 110001 (Regd.)

Regd. No.: S/57969

Regd. Office: BSNL Colony, Kalibari Marg, New Delhi – 110001

e-mail: info@bsnlrwadelhi.org

The President, BSNL Colony, Kalibari Marg, New Delhi - 110001	Photograph

Dear Sir,

I want to apply for enrollment as a member of the RWA - BSNL Colony, Kalibari Marg, New Delhi, my particulars are as under:

S. No.	Subject	Particulars
1.	Name of the Applicant	
2.	HRMS Number	
4.	Designation	
5.	Office address	
6.	Date of Birth:	
7.	Phone No.	
8.	Email ID:	

Declaration: I hereby certify that:

- (i) I unconditionally subscribe to the aims & objects of the Society and contribute towards attainment of the same.
- (ii) I will abide by the Byelaws of the Society, as applicable and amended from time to time.
- (iii) I have not been convicted of an offence involving moral turpitude involving imprisonment.

I request you to kindly enroll me as a member of the RWA- BSNL Colony, Kalibari Marg, New Delhi-110001.

Thanking You,

Yours faithfully

Dated:

Place: New Delhi Signature of the Applicant