



Life Membership Application Form

CENTRAL MOHYAL SABHA (Registered)

Regn.No. S/3040/Distt. South/2023 of 2023 under Society Act 1860

E-40 Greater kailash Enclave-2 South Delhi New Delhi 110048

Application No: _____

Date : _____

Personal Information

Name: Mr./Ms. _____

Father Name: _____

Mother Name: _____

Mother Maiden Name: _____

Spouse Name: _____

Date of Birth: _____

Place of Birth: _____

Children: _____

Mobile and Email: _____

Address:
(Please attach address proof)

Your/ Couple Image

Professional Information

Qualification: _____

Occupation: _____

Other Information

Self Brief introduction

Lifetime Membership Fees (adult above age 18) ₹500

Enroll spouse as life member for ₹250 (one time)

- I hereby declare that I volunteer to join Central Mohyal Sabha to participate in various community activities.
- I am interested in being involved in the activities of Central Mohyal Sabha and accept to pay Membership fee in the name of Central Mohyal Sabha as per fees structure.
- I have read and understood all terms and conditions of Central Mohyal Sabha Memorandum and willfully accept it.
- Paid Rs 500/750 towards my/couple CMS life membership via cheque/cash/bank remittance to **Saving A/c No. 923010027857918** – Axis Bank, CR Park, New Delhi 110019. **IFSC code: UTIB0000430.**
- Additional Charitable Donation of Rs _____ towards _____

Recommended by two Mohyals clans: Name, Signature, Mobile

Member 1:

Member 2:

Signature of Applicant

