

Samaj Vistar Foundation

Registration No.: E-9304/15/T

MEMBERSHIP FORM

Date: ____/____/20____ State : _____

Name : _____

Name of Father/ Husband: _____

Age/ DOB : _____ Gender : Male / Female / Other

Contact No. _____ / _____

Address : _____

Dist. : _____ Pin : _____

I am citizen of India. I am above 18 years old. I am not a member of any organization whose views, policies or actions are in conflict with the objectives of the Samaj Vistar Foundation. I have not been convicted of any offence involving moral turpitude. I have full faith in the Samaj Vistar Foundation's objective and vision. I wish to support the Samaj Vistar Foundation in achieving its goal.

*Please paste
your
recent colour
and clear
passport
size photo here*

Signature of Applicant

Receivers Name : _____

Mobile No. _____ / _____

Samaj Vistar Foundation

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Name : _____

Address : _____

Dist. : _____ Pin : _____

has received membership.

Your Work

Now that you have become the member of the Samaj Vistar Foundation please motivate more people to join the membership drive.

Nota Bene

If anyone is found indulging in activities against the objectives and against the Samaj Vistar Foundation's mode of functioning, his/her membership shall stand cancelled.

Receivers Name : _____

Mobile No. _____

For more information kindly visit : <http://samajvistar.org>

Contact : +91-8888-748-487