

Kalpant SewashramTrust (Regd) Membership Application Form

Plot No.35 United Paradise, Behind Krishna Sagar Hotel Murad Nagar Gang Nahar, NH-58 Meerut Road, Pin 201206, Uttar Pradesh, GHAZIABAD
Webs-kalpantSawashram.webs.com / Email-kalPantsadhana@gmail.com , kalpantSawashram@gmail.com, MOb.No. 09958502499, 09899410128

Name(in capital) _____

Father's/Husband's Name _____

M/F _____ Date of Birth _____

Address _____

_____ Pin.No. _____

Tel.No.(with STD)_____ Mobile .No. _____

Fax No._____ E-male id_____

Website _____

Profession _____ Academic Qualification's_____

ExPerience in Health care _____

Membership category choice _____

Give References of **TRUST** Member or any Name_____

mobile No._____ Membership.No. _____

Amount by Demand Draft/M.O./Cash Rs _____

Draft /Cheque No _____ Date _____ (Bank)_____

DD & cheque should be in favour of (Kalpant Sawashram Trust (Regd.) Payable at Ghaziabad

I agree to abide by the rules & regulation of the Kalpant Sawashram Trust as Framed from time to time

Sig of Introducer

Sig of Applicant

Two
passport
size photo