



SARV PARIVAR CO-OPERATIVE (U) THRIFT & CREDIT SOCIETY LTD.

(Registered Under Delhi Co-operative Societies Act, 2003 Vide Regn. No. 10802/ Section-VII/T/C/2023 Dated 27-03-2023)

Registered Office: C-56, Gali No. 8, Gamri Extension, Delhi-110053

Opposite Pal Dharamshala, (5th Pusta, Near Mother Dairy)

+91 7701899196, 9891438035 E-mail : Sarvparivar87@gmail.com

MEMBERSHIP APPLICATION FORM

Dated :

Membership No.

To

The President / Secretary,

Dear Sir,

I apply for admission as a Member of your Society.

I understand the Rules & Bye-laws of the Society and hereby agree to abide by them and any subsequent modifications thereto. I also hereby declare that I am neither a member of any other Co-operative Thrift & Credit Society operating or working in the State of Delhi nor taken any kind of Loan which is outstanding as on date.

I request that the Managing Committee may please allot my Shares of Rs. each and I also agree to deposit Rs. 200/- per month on account of Compulsory Deposit as well as Admission Fee of Rs. 100/- and other sums towards Building Fund, Kalyan Fund, Misc. Exp., etc., as applicable on the date of my Admission as Member.

I hereby nominate the following person to whom all money due to me by the Society or payable by me to the Society, in the event of my death, may be paid or recovered, as the case may be.

1. Name of Applicant (in Full and Block Letters)
2. Father's / Husband's Name
3. Mother's Name
4. Date of Birth Age (Years) Occupation
5. Monthly Income Rs. (Service / Business / Others)
6. Aadhar Card No. PAN No.
7. Present/ Correspondence Address Aadhar No.
8. Permanent Address
9. Phone / Mobile / Contact No., If any
10. Name & Address of the Employer or Business
11. Employer Phone No. E-mail :
- Total Members Dependent on Member Adult Kids
12.

Name of the Nominee Relationship Age of Nominee Years Occupation of Nominee Address

13. Introducer Name : Signature
14. Membership No. (.....)
15. Mobile No. (Signature of Applicant)

(FOR OFFICE USE ONLY)

Admitted Shri/Smt./Miss

as a Member of the Society vide Resolution No. (4)

case Book Dt. & M.C. Meeting Date and allotted Membership No.

Note Required Documents : Electric Bill / Water Bill / Aadhar card (Compulsory)

ID Proof / Election Card / 3 Photo / Passport / Driving Licence

PRESIDENT / SECRETARY

सर्व परिवार को-ऑपरेटिव (अर्बन) थ्रिफ्ट एण्ड क्रेडिट सोसाइटी लि०
नमूना हस्ताक्षर कार्ड

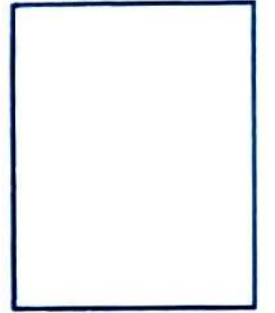
सदस्य का नाम.....

पिता / पति का नाम

सदस्यता संख्या

मोबाइल नं०.....

आधार नं०.....



हस्ताक्षर _____

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