

## MALAD GYMKHANA LIMITED

Established in 1970 Regd. Off: Gymkhana House, Marve Road, Malad (W), Mumbai 400 064 Tel. 28823504/28445923

## **APPLICATION FORM FOR LIFE MEMBER**

Please fill this form in Capital letters

Applicant's Particulars		Membership No.			
1. Name: Shri/Smt./Kum		(NAME)	(MIDDLE NAME)	(MIDDLE NAME)	
2. Date of Birth:	Age:	3. National	ity:		
4. Qualifications:		5. Occupat	ion:		
5. Date of Marriage:		7. Name of Spouse:			
8. Name & Date of Birth of Children Below 18 years (2 Children Only)			MALE / FEMALE		
9. Office Address:		10. <b>н</b>	ome Address:		
11. (a) Telephone: Mobile					
12. Pan No.:		Aadhar No			
14. Payment details: (Bank details)					

I declare:

a. I have not been convicted in a criminal proceeding and that there is no criminal case registered against me.

**b.** That I am aware that if at any time pursuant to me being made a member, if I am convicted in a criminal proceeding and/or that there is a criminal case registered against me in a court of law, then the membership issued to me shall at the sole discretion of the Board of Directors of the Gymkhana (BOD) be cancelled and the membership fees shall stand forfeited in favour of the gymkhana forthwith.

**c.** That I am aware that any incorrect information given by me either in this application or at any time including during the duration of my membership with the gymkhana, at the sole discretion of the Board of Directors of the Gymkhana (BOD) may result in cancellation of the membership issued to me and the membership fees shall stand forfeited in favour of the Gymkhana forthwith.

**d.** That I shall abide by the Bye-laws, Rules and Regulations of the Gymkhana including the Basic code set out and forming part of this Application, failing which my membership with the Gymkhana at the sole discretion of the Board of Directors of the Gymkhana (BOD) shall result in cancellation of the Membership issued to me and the membership fees shall stand forfeited in favour of the Gymkhana forthwith.

PLACE: \_\_\_\_\_

DATE: \_\_\_\_\_

We, the undersigned, know the applicant personally and hereby recommend him/her as a member of the Gymkhana, in accordance with the decision of the Board of Directors of the Gymkhana.

Proposer's Name:	Seconder's Name:
Membership No.:	Membership No.:
Signature:	Signature:
Scrutinizing Committee's Remark:	
Date: Chairman, Sc	crutinizing Committee:
BOARD'S DECISION:	

Date:	Hon. Secretary:
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Membership No. \_\_\_\_\_ Category: \_\_\_\_\_ \_\_\_\_\_ Folio No. \_\_\_\_

## Note:

1. Please fill this form in Capital letters.

2. Without completion of this form, Identity Card will not be issued.

3. Submitting this form will not guarantee your membership unless approved by the screening Committee and the Board of Directors.

4. Members will be allowed to nominate their children above 18 years of age, only after completion of 3 years of

Membership at the rate applicable at that time.

5. Incorrect information may result in cancellation of membership and forfeiture of the membership fees.

## Documents to be submitted for Membership:

1. Copy of Pan Card

2. Copy of Aadhar Card

3. Copy of Birth Certificate

4. Copy of Birth Certificates of Children below 18 years of age.

5. 4 (Four) latest stamp size colour photographs.

6. Copy of Marriage Certificate if married.

All aforesaid documents should be self-attested.

FOR OFFICE USE ONLY Accepted at E.C. Meeting held on		
Receipt No. & Date	 	
Amount ₹	 	
Mode of Payment	 	
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CHAIRMAN/HON. SECRETARY