

KASTURINAGARA WELFARE ASSOCIATION

C.A. 8(P), 3rd 'D' Cross, (Near BWSSB Water Tank), Kasturinagar, Bangalore - 560 043.

To,
The Secretary,
Kasturinagara Welfare Association,
C.A. 8(P), 3rd 'D' Cross, (Near BWSSB Water Tank),
Kasturinagar, Bangalore - 560 043

APPLICATION FOR ADMISSION

1. Applicant's Name & Age :

2. Father's Name :

3. Residential Address :

4. Office Address :

5. Site / Building :
(i) Number :
(ii) Site :
(iii) Main /Road :
(iv) Cross/Road :

6. Purpose of Admission

7. Other Information

I Certify that...

1. I am possessing the (BDA) Site/Building at Kasturinagara
 2. I hereby accept Bye-Law and its future amendment of the Association.
 3. I will not work against the interest of the Association.
 4. In all respect I will co-operate for the development of the Association.
- I hereby voluntarily agree to the above mentioned terms and condition and request you to kindly allot for membership.

Bangalore

Yours faithfully,

Date.....

Applicant's Signature

SECRETARY NOTE

Membership is allotted vide membership No..... Date.....

Adm : Fees is collected vide Receipt No..... Date.....

Smt. /Sri.....

Secretary