



भरारी अस्थिव्यंग विकलांग संस्था, डोंबिवली
BHARARI ASTHIVYANG VIKLANG SANSTHA, Dombivli

(Registered by the Physically Challenged for the disabled - Regd. No. F/5625/Thane Dt. : 5-5-97)
I.T.80G No. THN / CIT-I / Tech-I / 80G / 05-06 / 2658

Apangalaya : M-101/102, Chandresh Oasis, Lodha Heaven, Kalyan-Shill Road, Nilje, Dombivli (E), (M.S) INDIA. Tel. : 0251-2830679

Correspondence Add. : C/o. C.D. Deshpande, Shop No. 4, Vipa Society, Ramwadi, Near Agarwal Hall, Manpada Road,
Dombivli (East) 421 201. (Maharashtra) INDIA. Phone : 2444401, Dr. Anjali Apte : 2453063

APPLICATION FOR LIFE MEMBER

To,
The President,
Bharari Asthivyang Viklang Sanstha
Dombivli.

I hereby apply for Life Membership and furnish my required information as give below.

1. Name : _____
(Name) (Father's/Husband's Name) (Surname)
 2. Physical status - Normal / Disable : _____
If Disable then - Type & Percentage of disability : _____
 3. Local Address : _____

 4. Permanent (Native Place) address : _____

 5. Date of Birth _____ Age : _____ Years, Sex : Male / Female
 6. Qualification : _____
 7. Occupation : _____
 8. Office / Business Address : _____
 9. Telephone No. : _____ Mobile : _____
 10. Are you a member of any other such organisations ? Give details : _____

 11. Willingness to involve in Sanstha Activity : _____
- Place : _____
Date : _____ (Signature of the Life member)

Application Accepted / Rejected
(President / Secretary)

ज्ञालेल्या सभासदांपैकी फॉर्म भरलेला नसल्यास कृपया भरून पाठवावा.