

NON-RESIDENT INDIANS PARENTS ASSOCIATION (Regd.)

Flat C-411, Duo Harmony Apartment, 1, Suranjan Das Road, New Thippasandra Post, Bangalore 560075, India.

Phone: 94484 85720 Web Site: www. nripa.in E-Mail: info@nripa.in

APPLICATION FOR MEMBERSHIP

(Please complete all columns below using only block letters & sign below) This form may be photocopied for use by your friends and relatives)

Names: (1)	Date of Birth:	Blood Group:	-
(2)	dd/mm/yy Date of Birth :	Blood Group:	
.,	Date of Birth :dd/mm/yy Date of Marriage:dd/mm/	- I	· -
Mailing Address of the Applicants:	Contacts of the Applic Home Phone No. Office phone No. Mobile Phone No. FAX No.	ants:	
ID: (Membership fees details are given at the back of the Ap	E- Mail	ck and fill.)	
Membership Fee and Admission Fee 300.00: Enclosed Crossed Cheque No. dated			
on (Bank)		•	
If paid in Cash, please check here ()	(Dranen)	101	
Ocupation or Background of the Applicants: 1.			
2.			
Children located abroad at (1) City:StateCountry	(2)(_
Would you or either of you consider working honorary for NRIPA? Yes () No ()			
Areas of your general interest /Remarks:			
We agree to abide by the Rules and Regulations of NRIPA as prevalent and revised from time to time.			
Date: Signature of the	Applicants:1		
Sponsored by:	2 *********	*****	
Category: BP () SP () Membership effective from: Fee Paid Receipt NoDtSig.Treasurer:Sig. of Secretary:			
Membership is our Strength and Active Membership is our Power			