



B.B.D BAG PROFESSIONAL STUDY CIRCLE ASSOCIATION

ARADHANA APARTMENT, 1ST FLOOR, FL-102A, P-2, NEW C.I.T. ROAD, KOLKATA 700073

PHONE : +91 9331032177, E-MAIL – INFO@BBDBAG.COM

LIFE MEMBERSHIP APPLICATION FORM

To,
The General Secretary
BBD Bag Professional Study Circle Association.

AFFIX
PHOTO
OF
SIZE
3.5 CM
X
2.5 CM

Dear Sir/Madam,

I am interested to become the Life Member of the BBD Bag association. I agree to abide by the Memorandum and rules & regulations of the Association.

NAME IN FULL : _____

EDUCATIONAL QUALIFICATION: _____ OCCUPATION: _____

FATHER'S/HUSBAND'S NAME: _____ ICAI MEMBERSHIP: _____

OFFICE ADDRESS: _____

_____ PIN: _____

RESIDENTIAL ADDRESS: _____

DATE OF BIRTH: _____ DATE OF MARRIAGE: _____ BLOOD GROUP: _____

SPOUSE NAME: _____

PHONE NO: OFFICE: _____ RESIDENCE: _____

MOBILE NO: _____ EMAIL: _____

I enclose herewith Rs 25,000/- by Cash/Cheque No.: _____ Date: _____

Drawn on _____ as subscription for life Membership Fee in favour of B.B.D Bag Professional Study Circle Association. I hereby promise regular participation in the activities.

Proposed By Name: _____ Signature _____

Seconded By Name: _____ Signature: _____

Application's Signature _____ Date: _____

For Office Use Only

Application Received on: _____ Application Approved on: _____

Subscription received by cash/cheque no. _____ Rs. _____

Membership No Allotted: _____

PRESIDENT

SECRETARY

CHAIRMAN MEMBERSHIP DEV. COMMITTEE