



**RAYAT SHIKSHAN SANSTHA'S
KARMAVEER BHAURAO PATIL COLLEGE VASHI, NAVI MUMBAI**

Alumni Association

(Regn. No.MAHA/391-03/Thane)

Affix
Passport Size
photo

MEMBERSHIP FORM

To,
The Chairman,
Alumni Association
Sir,

This is to request you to enrol me as a Life/Ordinary member of Alumni Association.

- My Particulars are as follows,

1. Full Name:

(Beginning with Surname and in Capital Letters)

2. Full Address (R):

3. Mobile No.: _____

4. Email Address:

- Details of Studentship:

1. Years: From _____ to _____

2. Branch: Arts/Commerce/Science/Others _____

3. Degree/ Class _____

- Personal Details:

1. Date of Birth _____

2. Blood Group _____

3. Hobbies:

- Professional Details:

1. Current Qualification: _____ [Mention final degree]

2. Name and Address of office / organization:

3. Position/Designation:

- My Experience as a student in K.B.P. College, Vashi

Life/ Ordinary membership amount paid Rs.

Cash/Cheque

No. _____

Bank _____ Receipt

No. _____

*I shall abide by rules and regulation of the association.

*I shall attend maximum possible number of programmes arranged.

*I shall help the Association through donations in cash or kind as required.

Date:

Signature of the Applicant

For Office Use Only

The Executive Committee is happy to accept,

Mr./Ms. _____

As Life / Ordinary member of Alumni Association, Resolution Number _____

_____ Dare: _____

Date:

Signature

Chairman/Secretary