JAI DHAN LAKSHMI CO-OPERATIVE (U) THRIFT & CREDIT SOCIETY LTD.

(Registered under Delhi Co-operative Society Act, 2003 vide Regn. No. 10262 (E) Dated 15-02-2011)
C-34 (New No. C-265), Gali No.4-A, West Vinod Nagar, Delhi-110092
Ph. : 011-65698881, 011-22478701
E-mail : info@jdlsociety.com, Web.: www.jdlsociety.com

MINOR MEMBERSHIP APPLICATION FORM

Membership No. : JDL

Minor Member Photo	Parent / Guardian Photo

To,

The President/Secretary

I wish to apply for admission as a member of your society.
I understood the Rules & Bye-laws of the society and hereby agree to abide by them and any subsequent modification thereto. I also hereby declare that I am neither a member of any other co-operative thrift & credit society operating/working in the state of Delhi nor taken any kind of loan which is outstanding as on date.

I request that the managing committee may please allot me..... shares of Rs.100/- each and I also agree to deposit of Rs. 200/- per month on account of compulsory deposit as well as admission fees of Rs. 100/- and other sums towards building funds, kalyan funds, misc. exp. etc. as applicable on the date of my admission as member.

Personal Detail

Applicant Full Name	
Father's Name	
Mother's Name	

Date of Birth D D M M Y Y Y Y

Birth Certificate : Yes ☐ No ☐

Age ☐☐ Years ☐ Male ☐ Female

Present Address/Correspondence Address

Flat No./House No./Society Name	
Room No./Name/Area	
Landmark/State	Pincode
Contact No.	

Permanent Address

Flat No./House No./Society Name	
Room No./Name/Area	
Landmark/State	Pincode
Contact No.	

Monthly Income of Guardian/Parent: _____ Occupation _____(Service/Business/Others)

Name of the Nominee ..... Relationship..... Age of Nominee ..... Years

Signature of Introducer/Advisor .....

Introducer/Advisor Full Name : .....

Membership No./Advisor Code (.....)

Mobile No. .....

.....
(Signature of Parent/Guardian)

.....
(Signature of Minor)

(For Office use only)

Admitted Shri/Smt./Miss .....
as a Member of the Society vide Resolution No. .....
of M.C. Meeting held on ..... and allotted Membership No. .....

PRESIDENT / SECRETARY