

**SOCIAL ACTIVITES INTIGARATION-SAI**

14-G/F, Byculla Municipal School Building, Near 'S' Bridge,

N.M Joshi Road, Bhyculla (W).Mumbai-400 011. INDIA.

Phone no:-91-22-23016976/9892091858

(Registered under societies Regi. Act 1860 &amp; the Bombay Public Trust Act 1950)

(For donation 50% Exemption Under 80G &amp; 100 % tax exemption under 35 AC)

(Registered under FC (R) Act 1967)

TO,

The President,

SOCIAL ACTIVITES INTIGARATION (SAI)

Byculla. (W).

Mumbai-400 011. INDIA.

Dear Sir

I request to be enrolled as Life Member/Patron Member of the **SOCIAL ACTIVITES INTIGARATION- SAI** I agree to abide by the rules and regulation of the organization. I am herewith sending my subscription for General Member/ Well wisher/ patron member of Rs. \_\_\_\_\_

(Rupees \_\_\_\_\_) by Pay order/  
DD/cheque on \_\_\_\_\_ bank payable at Mumbai/ Accept donation in Cash  
Rs. - (Rs. \_\_\_\_\_)

(Signature Applicant)

To be filled in Block Letters by the Applicant in Duplicate

1. Full Name: \_\_\_\_\_

2. Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

3. Address: Present: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

4. Qualification(s): \_\_\_\_\_

5. Present Designation &amp; Assignment: \_\_\_\_\_

6. Association with the Medical/Social work: \_\_\_\_\_

7. Are you a Member of any other Association? (If so, please Mention) \_\_\_\_\_

8. What are your Hobbies? \_\_\_\_\_

9. The Field of your interest in the activities of SAI? \_\_\_\_\_

10. How much time you can spare for SAI activities? \_\_\_\_\_

11. How you want to be spelled on photo-Identy card &amp; Membership certificate: \_\_\_\_\_

(for further Details you can send your Bio-Data to SAI \_\_\_\_\_)

**(For office use only)**

Application received on: \_\_\_\_\_ Subscription received on: \_\_\_\_\_

Approval date: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

Membership Fee: General Member Entry Fee-Rs.5 + Rs.10 monthly - Life member  
**Rs.5000/-only; patron Members Rs.10,000/**