

Association of Knowledge Workers, Lucknow

Website: www.akwl.org , Regn No 1963/2005-06, Dated 21-1-06,PAN AAAAA7317H

INDIVIDUAL MEMBERSHIP APPLICATION FORM

Category of membership: Donor Member /Patron /Life Member/

1. Name (Mr./Ms.)
2. Name of spouse:.....
3. Date of Birth:
4. Address :

Home Address	Office Address	
		Phone No (office): Phone No (Res.): Mobile: Email:

3.Name of the Organization serving/ Designation

4.If Retired: Last Organization name/Designation.....

5. Adhar ID Noand PAN no.....

6.Type of Organization serving/served :

7.Nature of Business of your Organization:.....

8.Qualifications:

	Degree Name	Year	University/Institute	Specialization
Graduate Degree				
Post Graduate Degree				
Doctorate Degree				
Any Other professional course				

9.No.Publications/ specializations/ patents, if any :

.....

10.Experience: Total job experience (in years):

Organization	Year From	Year To	Designation	Location

11.What services you expect from the Association.....

12.Details of DD/ Cheque No. Dated, Bank

Subscription: Rs.5000 (life membership) / Senior Citizen Rs 4000, and Rs 400(Student member for 2 years), **additional membership for spouse membership20%. only** and for Patron - no subscription

Please pay by cheque in favour of “Association of Knowledge Workers,Lucknow” or transfer electronically money to our bank account as per following details.

A/c holder: Association of Knowledge Workers, Lucknow
ICICI BankMahanagar, Savings bank account number: 696101433013
RTGS/NEFT/IFSC code: **ICIC0001048**.

Signature of Applicant Date.....

Desirable:Please attach your CV and details of services you may provide or seek through AKWL, with terms and conditions, if any

__For office Use Only

Recommended by :

Name/ Signature :

Date :

Signature of Secretary:

Date

