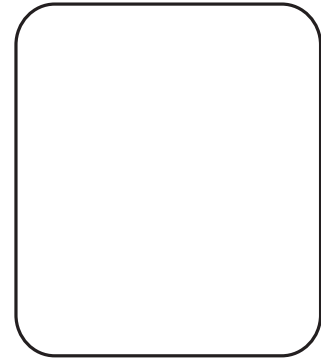




## Membership Form

### Dignity's Consumer Awareness Program MEMBERSHIP FORM



Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Blood Group: \_\_\_\_\_

Rural/urban.....Citizenship.....

Educational Qualification.....

Spouse Name/Nomination.....

Address.....

.....Pin.....

Phone.....(O).....Mobile.....

Email:.....Occupation.....

Address (Office)..... Pin.....

Payment Details : Cheque No.....Amount .....Date.....

Bank .....

I will follow the rules and regulation of 'Dignity Restoration & Grievance Settlement Association' and will never act against them.  
I am declaring that I am joining the organisation with my own consent and want to help the organization to serve with dignity  
I further declare that I am in sound mind and not involved in any criminal activity. I am joining this program without any illegal purpose  
Please attach a copy of proof of address and identification.

Date :

Plate:

Signature



# Membership Form

MEMBERSHIP FEE	
JOINING FEE (Individual Members, Life)	Rs.2100/-
YEARLY SUBSCRIPTION	Rs.100/-
Yearly Membership FEE	Rs.500/-
Yearly Membership FEE (For School Children / Senior Citizens Only)	Rs.300/-

Please send Bank Draft / Cheque in favour of :  
**Dignity Restoration And Grievance Settlement Association** Payable New Delhi.

**Bank Details:** State Bank of Bikaner & Jaipur  
 A-1/19, Safdarjung Enclave, New Delhi-110029

**Account No : 61218566894**

IFC Code: SBBJ0010579

Please Do not make cash Payments.  
 Please enclose your Photo ID and Address ID Proof

**Please deposit Membership Fee in our bank account and send us your membership form.**

**Benefits:**

1. You will be getting free legal advice to consumer related problems.
2. You will be part of Dignity India team.
3. You will be helping others in providing advice and resolving consumer related problems.
4. You will be invited to attend seminars/ conferences / awareness programs organised by us and can organise programs with the help of Dignity India
5. You will be issued a plastic identity Card and membership Certificate.

Please fill form and send it to: -  
**Dignity Restoration And Grievance Settlement Association**  
**B4/84/2, Safdarjung Enclave, New Delhi -110029**  
**Phone: 011-26173999 (M) 09818003999, 09540003999**  
**e-mail: director@dignityindia.org**

### For Office use only:

Membership No.....	Cheque/ Bank Draft No.....
Bank.....	Date.....
Recommended by.....	Approved by..... Date.....