

# SJOBA FOUNDATION

St. John's High School, Sector 26, Chandigarh

## MEMBERSHIP FORM

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

Address \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_ Pin: \_\_\_\_\_

Phone: (HOME) \_\_\_\_\_ (OFFICE) \_\_\_\_\_ MOBILE: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Class & Year of Joining St. Johns: \_\_\_\_\_

Class & Year of Leaving St. Johns: \_\_\_\_\_

Relevant Batch: \_\_\_\_\_

Occupation: \_\_\_\_\_

Details of Office held in SJOBA: \_\_\_\_\_

(Office, Year and Name of SJOBA PRESIDENT)

Aadhar No \_\_\_\_\_ PAN No \_\_\_\_\_

Whether Citizen of India? YES/ NO. If not, citizen of \_\_\_\_\_

\_\_\_\_\_

Signature

FOR OFFICE USE ONLY.

Receipt Number: \_\_\_\_\_

Membership Number: \_\_\_\_\_

PAYMENT TO MADE IN FAVOR OF : SJOBA FOUNDATION.

MEMBERSHIP Fee : Rs. 30,000/-