

Sl. No. :



KODAVA SAMAJA (R)

No. 7, 1st Main Road, Vasanthanagar, Bengaluru - 560 001
Phone : 2226 0188 / 2235 1088
Email : kodavasamajabr@gmail.com Website : kodavasamajabangalore.org
APPLICATION FOR MEMBERSHIP

Passport Size
Photo

Office Use
Membership No. _____

(BLOCK LETTERS)

Name with Initials and Family Name _____

Father's Name with Family Name _____

Mother's Name with Family Name (Thamane) _____

IF MARRIED

(a) Husband's Name with Family Name _____

(b) Husband's Mother's Family Name _____

(c) Wife's Name with Family Name (Thamane) _____

Number of members in the family _____ Occupation of the Member _____

Age _____ Date of birth _____ Sex : Male Female Blood Group _____

Address _____

Pin _____ Telephone _____ Mobile Number _____

Kodagu Address _____

Pin _____ Telephone _____ Mobile Number _____

Nominee for Death Fund with relationship _____

Kindly enroll me as a Life / Associate Member of the Kodava Samaja, Bangalore. I agree to abide by the rules and regulations of the Bye-Law of the Samaja.

Date : _____

Applicant's Signature

Name	Phone	Membership No.	Signature
Proposer with Family Name <small>(President / Secretary / Area Committee of the Respective Sangha)</small>	Mob.: _____		
_____	Ph. : _____	_____	_____
Seconder with Family Name	Mob.: _____		
_____	Ph. : _____	_____	_____

The Proposer and the Seconder should know the full details of the applicant.

Membership Fee Rs. _____ Receipt No. _____
Cash / DD _____ Date : _____

Decision of the Managing Committee
Membership Accepted Rejected

President

Hon. Secretary

- NOTE :
1. Minimum age for membership is 18 years.
 2. Applicant above 60 years are not Eligible for Death Fund.
 3. Applicants shall produce a copy of address proof and age Proof.
 4. Proposer and Seconder shall be Life Members of Kodava Samaja.
 5. Membership fee - Life Rs. 3025/- Associated Rs. 2025/-. Above 60 years Rs. 2025/-
 6. Recent passport size photo 2 Nos.
 7. Payment through Cash/DD.
 8. Proposer and Seconder will be held responsible for any wrong information given by the applicant.