



Sundarban Nirmal Paribesh Mission(SNPM)

(A Registered Charitable Trust)

1/2 Sree Colony, PO: Regent Estate,

PS: Patuli, Kolkata- 700092

Govt. Registered :: Estd.2012

MEMBERSHIP FORM

To
The General Secretary,

I

S/o, W/o, D/o, am a resident of the

House name,no..... Street.....

PO:.....PS: Town:

Dist.....State.....Pin code.....

Having been inspired by the mission and purpose of your Trust and having read and fully understood the following terms and conditions and agreed to comply with the rules and regulations with its subsequent amendments ,want to apply for the membership of **Sundarban Nirmal Paribesh Mission(SNPM)** for category given below:

Type of Member	Admission Fee (RS.)	Donation	Monthly Subscription (Rs.)	Rights and duties	Duration	Tick your choice
General	5000/-	Nil	100.00	No voting right and not to be elected	Five years and renewable on payment of admission fees.	
Trust Member/Trustee	5000/-	95,000/-	As above	Will have voting right, electable to the Governing Body	Life Member with nomination facility	
Patron	Nil	200,000/- and above	Nil	No voting right. Will be invitee in all ceremonies of the Trust	Life	

I pay herewith admission fee of Rs.....membership subscription of twelve months of Rs..... and donation of Rs..... as per rates and charges mentioned in the above table.

I do also, hereby, declare that if in future I voluntarily leave the Trust, I shall inform my so intention in writing on payment of dues, if any, payable by me to the Trust.

Please enroll me as.....member of the Trust.

Date :

Yours faithfully,

Signature of the applicant

N:B: - The authority for accepting application for membership shall be the Chairman, Working Chairman, General Secretary or any other authorised person only.

- **Mission of the Trust** : Unity, Honesty, Sincerity, Service to mankind and Self Realization .
- **Vision of the Trust** :

1. To make economically backward people self-dependent;
2. Building OLD AGE HOMES for senior citizens
3. To establish Health Centre for the poor
4. To establish various Educational Institutions for the rural students
5. Environmental awareness among the people

-: Terms and conditions & Rules and Regulations:-

1. 18 years and above is the eligibility to be a member of the Trust.
2. The Trust can sue against me for committing any misconduct or evil companion or damaging any property of the Trust.
3. I shall be liable to render voluntary service for the interest of the Trust at least for 2 hours in a week as and when it will be required..
4. Individually I may be loyal to or follower of any political party but shall not indulge in politics or political activities in the Trust and shall always be alert that no political influence vitiates activities of the Trust.
5. I shall not use any money or and property of the Trust for my own interest.
6. I shall actively participate in all activities of the Trust. I shall be liable to repay or return within the stipulated time money or goods, if any, taken by me while implementing any programme of the Trust. In case of non-compliance, action taken against me by the Governing Body shall remaining binding on me.
7. I shall remain liable to discharge any responsibility, entrusted upon me, with honesty, sincerity and respect and hand over the same to the General Secretary of the Trust.
8. If I confront with any dispute, I shall settle the same discussing with all others of the Trust .
9. If I act anything against the mission and purpose or be unable to accept the above terms and conditions of the Trust , actions , taken in majority by the Governing Body of the Trust, shall remain binding on me.

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My Personal biodata are given below:

1. Name Sex(Male/ Female).....
2. Name of father/ husband
3. Age Date of Birth.....
4. Educational qualification.....
5. Extra-curricular activities.....
6. Experience
7. Occupation
8. Address for Correspondence
- Block Tehsil
- District State
- Pin Code Telephone No./ Mobile (Resi.)
- (Off.) E-mail ID
9. Name of Nominee(s).....Age
10. Relation with the applicant Address
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11. PAN No.....
12. Voter ID No.....



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Signature (in full)/thumb
impression of the Applicant

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Sl. No..... Trust Member (Trustee)/General Member/Patron

Name of the Member

Date of enrolment as Member

Date of relinquishing as Member

Date of expulsion of membership

Reasons for expulsion

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Signature of Member

Comments of the authority accepting application for membership.....

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Date :

Signature of authority accepting application

Signature of Chairman/Working Chairman

Signature of General Secretary

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