

Krishnamurthy's Self-Introspection Club
Flat: D1, 30/69 Perumal koil st, West Saidapet, Chennai-15
Ph: 044-24853854, Email: achievemore1954@yahoo.com

KSIC Membership Application

Name: _____

Age: _____ Years Sex: Male / Female

Education: _____ Profession: _____

Residential address: Door No.: _____ St / Road Name: _____

Location: _____ City / Town: _____ Land Mark: _____

State: _____ PIN CODE: _____

Contact numbers / Residence: STD Code _____ Phone _____

Personal Email address: _____

Alternate Email address: _____

Office address: Door No.: _____ St / Road Name: _____

Location: _____ City / Town: _____ Land Mark: _____

State: _____ PIN CODE: _____

Contact numbers / Office: STD Code _____ Phone _____

Official email address: _____

Alternate email address: _____

Membership in other forums:

1. _____ 2. _____ 3. _____

Membership preferred: Please circle the item of your choice:

Royal membership

Group membership (specify)

Subsidized membership

Reasons for taking KSIC membership:

1. _____
2. _____
3. _____

Payment details:

Mode : DD / Cheque / Paypal

Amount: _____

Bank's name & Place: _____

Date of DD / Cheque : _____

DD / Cheque Number: _____

I hereby declare that I have understood the details and terms & conditions of **KSIC** and inclined to be a member. Please enroll me as a member and I agree to abide by the terms and conditions

Thanking you,

Yours sincerely,

Date

Signature

Important Note:

Your alternate email IDs are important to communicate to you, in case of your regular email IDs are not accessible.

Please send a one page personnel cum professional profile of you for our database. It can help us offer you suitable opportunities later, for your growth .