

Membership Form No. -

Date: / / 200.....



Membership Form

Name:.....

Address:.....
.....
.....

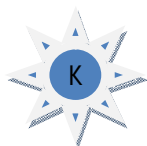
Occupation: Student Other [If other than student please specify]
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Sex: Male Female [give a tick mark]

Age (Optional).....

Contact No.--- land line..... mobile-.....

I would like to be enlisted as a volunteer of *kharkuto* and help people as far as I can under the banner of this organization.



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[Signature in full]

As *kharkuto* is a self-aid organization the members have to donate Rs. 20/- per month to the fund of the organization. All the expenses done by the organization will be published before the members by a notice or monthly bulletin. The organization takes all the responsibilities to spend the moneys for proper social works with certain cares.