

Membership Application Form

1.	Name of the Study Center
2.	Registered Address
	PIN
3.	Telephone Mobile
4.	Area of Study Center
5.	Head of the Institution (Owned By)
6.	Qualification of the Head of the Institution
7.	No. of Class Rooms
8.	Total carpet area (Specify the area in Sq.ft)
q	Total no of computer

Photo	ocopy of Trade License.		
11. Demand Draft / Cheque Details			
a)	Name of Bank		
b)	DD / Cheque. No		
c)	Amount(d)	Dated	
belief and h	rtify that the contexts stated above are conereby confirm that our Organization / Soutes whatsoever.	,	
I accept that any facts stated above. If found incorrect will automatically resultin cancellation for nominations associate. However I will have no right whatsoever to fight / challenge legally against the judgment in anu court of law. All disputes are subject to krishnanagar (West Bengal) Jurisdiction only.			
Date			
Place		Signature of the Head of Institution	

10. Enclose Passport Photo and (Photocopy of Driving License / Voter ID Card),