



ANANDA NILAYAM

SENIOR CITIZEN'S HOME

Thane office: c/o F-TAM Center, A 202, Regal Plaza, Lokpuram, Vasant Vihar, Thane west, Pin 400610
Site Address: S No. 101/1/3, Village Tadgaon, Taluka - Sidhagad Pali, Dist - Raigad, Pin 410 205
Mob.: 9920528833 / 9819043703 | E: anandnilayampali@gmail.com | Web: www.anandnilayam.com

MEMBERSHIP FORM

Applicant is: INDIVIDUAL / ORGANIZATION

Surname (or Organization Name)

First Name:

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Father / Husband Name:

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Passport Size
Photo

in case organization, attach copy of resolution

Date of Birth:

--	--	--	--	--	--	--	--	--	--

Male/Female

Married / Unmarried

Adhar:

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Pan No:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Blood Group:

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Diseases if any:

Special Care:

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Use extra sheets to give all info.
Attach Doctors Certificate

Communication Address:										Family Members Names / Mobile:									
Phone										Emergency									
Mobile										Phone									
E-mail:										E-mail:									

Type of Membership: A : Full Room, B : Twin Share Basis, C : Dormitory Bed, D: 30 Days/Year

Payment Options: Lumpsum/EMI-5/EMI - 10 / EMI - 15

All cheques to be drawn in name of "ANAND NILAYAM SENIOR CITIZEN HOME"

Native Place:

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Any Experience in Social Field:

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Hobbies:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Introduced by:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nominee: _____ Adhar No. _____ Relation: _____

Place: _____ Date: _____ Signature: _____

I hereby agree, abide by all Rules & Regulations of the Ananda Nilayam Senior Citizen's Home

FOR OFFICE USE

Type of Membership

Amount Paid

Cheque /UPI ref

Receipt No

Date

EMI:

Rs. _____

FOR Approved - Yes / No Board of Trustees, Approval & Date