



Photograph  
&  
Signature

## MEMBERSHIP FORM

Full Name of a Member:-  
(Fill In Capital Letters Only)


Permanent Postal Address :- \_\_\_\_\_  
Pin- \_\_\_\_\_

Current Postal Address :- \_\_\_\_\_  
Pin- \_\_\_\_\_

Contact:- (R) \_\_\_\_\_ (O) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Personal Email ID:- 


Company Email ID:- 


Date of Birth:- \_\_\_\_\_ Age:- \_\_\_\_\_  Male  Female

Blood Group:- \_\_\_\_\_ Height:- \_\_\_\_\_ Weight: - \_\_\_\_\_

Any significant Medical or Physical disorder \_\_\_\_\_

Educational Qualification:- \_\_\_\_\_

Business /Profession:- \_\_\_\_\_

Area of Interest:-  One day outing  Trekking  Adventure Sports  Camp  Beach Holidays

Hobbies :- \_\_\_\_\_

How did you come to know about us:-  Newspaper  Friends  Other

Previous experience related with nature trek:- \_\_\_\_\_

Type of membership One Year (Rs. 300/-)

Date of Joining Membership :- \_\_\_\_\_ Date of Expiery :- \_\_\_\_\_

### Declaration

I have read & I am Fully aware of all the Terms & Conditions. I agreed to follow the instructions given by the organizers during any type of activity.

Date \_\_\_\_\_ Place \_\_\_\_\_

Sign of Applicant  
(Parent/ Guardian to sign if the Applicant is a minor)

Stamp & Sign of Authority