



Bharateeya Kala Samithi



MEMBERSHIP FORM

Date: _____

Name _____

Address : _____

Phone No. _____ Mobile No. _____

I Wish to be enrolled as

Annual Member : Rs. 1000/-

Life Member : Rs. 10,000/-

Patron : Rs. 1,00,000/-

Enrolled Period from _____ TO _____

Payment Details :

By Cash/Cheque/DD Rs. _____ (Rupees) _____

Vide Cheque/DD No. _____ Drawn on _____

Signature of the Member

for Bharateeya kala samithi

Authorized Signatory

ACKNOWLEDGEMENT

Received with thanks from Sri I Smt I Kum I A sum of Rupees _____
(in words _____)
towards Annual I Life I Patron Membership for the period _____ to _____
by Cash I Cheque I DD. No. _____ drawn on _____.

For bharateeya Kala Samithi
Authorized Signatory