



An ISO 9001:2015 Certified Organization

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).....
9. Total no of computer.....

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

11. Demand Draft / Cheque Details.....

a) Name of Bank.....

b) DD / Cheque. No.....

c) Amount.....(d) Dated.....

I hereby certify that the contexts stated above are correct and true to my knowledge and belief and hereby confirm that our Organization / Society / Trust is free from any legal / official disputes whatsoever.

I accept that any facts stated above. If found incorrect will automatically result in cancellation for nominations associate. However I will have no right whatsoever to fight / challenge legally against the judgment in any court of law. All disputes are subject to Krishnanagar (West Bengal) Jurisdiction only.

Date.....

Place.....

Signature of the Head of Institution