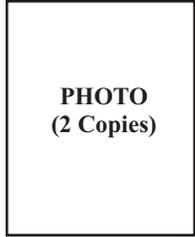




OPCAR FOUNDATION (Regd.)

(A Registered Public Charitable Trust for Integrated Human Welfare)
Admn. Office: D-2, Golf View Apartment, Saket, New Delhi-110017

Contact No : 011-26868 598, 9891137958, 9911101689, 9718313130
Email: opcar_foundation@rediffmail.com. Web: www.opcarfoundation.org



APPLICATION FORM FOR ASSOCIATE MEMBERSHIP

S.No.

1. Name (in Block Letters).....
2. Father's/Husband's Name
3. Date of Birth
4. Residential Address
-
5. Profession.....
6. Official Address.....
7. Special Interests.....
8. Contact Numbers..... (M)
9. Email.....
10. ID Card No.(Enclose copy of ID)
11. Referred by

I certify that the information given above is correct to the best of my knowledge and belief.

Place : -----

Date :

Signature of the Applicant

For official use only

GRANTED Associate Membership to Mr. / Mrs. / Ms

and issued Identify Card No. OFAM/

Place :

Founder Chairperson/Director

Date :

OPCAR FOUNDATION (Regd.)

Note : For Life Time Membership - Pay Rs. 4000/- Cash/-Cheque or Draft in favour of "opcar FOUNDATION"