



Alliance Française

Pune - Inde

Attach 2
photographs

APPLICATION FOR LIFE / ORDINARY/OTHER
MEMBERSHIP

(TO BE FILLED IN CAPITAL LETTERS)

FULL NAME : _____

ADDRESS : _____

OCCUPATION : _____ QUALIFICATION: _____

DATE OF BIRTH : _____ NATIONALITY : _____

MOBILE No : _____ TELEPHONE No : _____

E MAIL ID : _____

HOBBIES & ACTIVITIES _____

I speak French : Very well / rather well / a little / not at all

I understand that my Membership will take effect after this Form has been approved by the Managing Committee. I agree to abide by the Rules & Regulations of Alliance Française de Pune.

Date : _____ Signature : _____

Proposed by : (Current Member of Alliance Française de Pune)

Name : _____ Signature : _____

Seconded by : (Current Member of Alliance Française de Pune)

Name : _____ Signature : _____

SINGLE MEMBERSHIP FEES : Taxes as applicable

Entrance Fee : Single Member : Rs. 100/-

Ordinary Membership : Rs. 1000/- per annum

Life Member : Rs. 20,000/-

Life Corporate for Companies : Rs. 5,00,000/-

Life Corporate Membership for Private Schools : Rs. 1,00,000/-

Life Corporate Membership for Govt. Schools : Rs. 10,000/-

For Office use only –

Fees paid Rs. _____ by Cash/Chq No. _____ Date _____ Bank _____

Receipt No / Date :

Approved by the Managing Committee on :

Accepted by : (on behalf of the Managing Committee)

Name : _____ Signature : _____