



APPLICATION FORM FOR MEMBERSHIP

1. Name.....
2. Address.....
.....
3. Mobile No..... E-mail
4. Date of Retirement and Post held at the time of Retirement:
5. Organization from which retired:
6. Year of allotment in IPS and cadre:
7. Period of services in IPS:
8. Date of Birth:
9. Hobbies & interests:

I request to be enrolled as a **Life Member of the Association** and send herewith a crossed cheque no. _____ dated _____ of **Rs. 10,000/-** (Rupees ten thousand only) drawn on _____ Bank favouring **ARSIPSO**, (i.e. **Rs. 5,000/- One-time Entry Fee + Rs. 5,000/- Voluntary Annual Contribution**).

Date: _____

Signature of Applicant