

RECA-KOLKATA CORPORATE MEMBERSHIP FORM

Application No. _____

Date _____

DETAILS OF APPLICANT

Name of the Applicant: _____

Type: Partnership LLP Private Ltd. Public Ltd.

Date of Incorporation: _____ Pan No: _____

CIN No: _____ Service Tax Registration No: _____ Operating in Real Estate Since: _____

CONTACT DETAILS OF APPLICANT

Office Address: _____

Office No: _____ Mobile No: _____

Fax: _____ Email: _____ Website: _____

TYPE OF MEMBERSHIP APPLYING

Corporate Member with Two Representatives:

Corporate Member with Three Representatives:

BUSINESS DETAILS

Reason for applying Membership: _____

Other Club or Association Membership Details: _____

DECLARATION

I / We solemnly declare that - (A) All the above information is true to the best of my / our knowledge and nothing relevant has been concealed or suppressed. (B) I / We undertake to inform the association of the charges that may occur in the information and particulars furnished in the application in future. I / We hereby apply to become a member of RECA-Kolkata. I / We have read and understood the terms and conditions and I / We agree to abide the rules and regulation of RECA-Kolkata that may be in force from time to time.

SIGNATURE / S

Signature of the Applicant	
Date: _____	Place: _____

PROPOSED BY

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SECONDED BY

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Approved by:

President: _____ Secretary: _____ Chairman-Membership: _____

Date of Approval	
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FIRST MEMBER DETAILS

Name: _____
Residence Address: _____

Residence Phone No: _____ Mobile No: _____
Email: _____ Date of Birth: _____ Marriage Anniversary: _____
Educational Background: _____ Blood Group: _____
Name of Spouse: _____

Affix recent
passport size
photograph of
applicant / Duty
signed cross

SECOND MEMBER DETAILS

Name: _____
Residence Address: _____

Residence Phone No: _____ Mobile No: _____
Email: _____ Date of Birth: _____ Marriage Anniversary: _____
Educational Background: _____ Blood Group: _____
Name of Spouse: _____

Affix recent
passport size
photograph of
applicant / Duty
signed cross

THIRD MEMBER DETAILS

Name: _____
Residence Address: _____

Residence Phone No: _____ Mobile No: _____
Email: _____ Date of Birth: _____ Marriage Anniversary: _____
Educational Background: _____ Blood Group: _____
Name of Spouse: _____

Affix recent
passport size
photograph of
applicant / Duty
signed cross

