



Gokhale Memorial Girls' School

ALUMNI ASSOCIATION

1/1 Harish Mukherjee Road, Kolkata – 700 020.

MEMBERSHIP FORM

**paste
photo**

(Please fill the form in BLOCK letters)

1. Name : _____

2. Maiden Name : _____

3. Address (Permanent) : _____

4. Telephone no.: _____ E-mail address : _____

5. Educational qualifications : _____

6. Current Occupation : _____

7. Extracurricular interests : _____

8. Membership : Student member Rs.100/- each year Annual member Rs.500/- each year Life member Rs.5000/- one time

Life membership fee in Cheque or DD only
'Gokhale Memorial Girls' School
Alumni Association'

9. Year of joining GMGS :

10. Year of School passing / leaving :

11. How do you wish to contribute to the activities of GMGS Alumni Association?

12. How did you hear about us? Internet School Other members Event

The information provided above are true to the best of my knowledge. Membership shall be cancelled if detected otherwise. I hereby accept and agree to abide by the rules of the GMGS Alumni Association or be liable to cancellation of membership.

Date: _____

Signature _____

For office use only

Member: _____ Proposed by _____ Seconded by _____

Membership: Accepted Awaiting consideration Not accepted

PAYMENT details: Cash / Draft / Cheque with no.: _____ dated: _____

on Bank: _____ branch: _____

Document submitted: Photo Photo ID School ID Address proof

MEMBERSHIP no. _____

Signature (GMGS AA Secretary)