



NATIONAL FEDERATION OF THE BLIND

राष्ट्रीय दृष्टिहीन संघ भारत

Plot No.21, Sector VI, Press Enclave Road, Pushp Vihar, New Delhi - 110017.

MEMBERSHIP FORM

1. NAME (IN BLOCK LETTERS)
2. DATE OF BIRTH
3. FATHER'S / HUSBAND'S / GUARDIAN NAME
4. MARITAL STATUS
5. SEX
6. QUALIFICATION
7. OCCUPATION
8. CATEGORY BLIND / SIGHTED / LOW-VISION / OTHER DESABILITIES
9. PRESENT ADDRESS
10. PERMANENT ADDRESS
11. MOBILE 12. E-MAIL - ADDRESS
13. SPONSORED BY
14. Has your membership ever been suspended; if yes give details

DECLARATION

I, _____ hereby declare that the above facts given by me are true and correct. I further declare that I have read the terms and conditions of membership of the Federation contained in the byelaws of the Federation and I fully agree with terms and conditions. I further declare that I shall devote myself for the Federation from time to time at the need. I also declare that I shall participate in the activities of the Federation and shall abide by the provisions of byelaws of the Federation.

Place

Date

Signature/LTI/RTI

NOTE :-

1. All members except company members are required to pay membership fee of Rs.50/- and admission fee Rs.20/- The Membership shall be renewed every year from April to June by paying Rs.50/-
2. Disability certificate shall be enclosed with the application form alongwith photograph.
3. Proof of address and age has to be enclosed with the applicatin form.
4. Company members are required to pay Rs.1000/- in the beginning as donation to the Federation and their annual subscription will be Rs.250/-
5. Company members do not require to fill column number 2-7.
6. For becoming the member of the Federation it should be noted that he/she should not be the member/office bearer of any other organisation working in the field of visually disability or any other disabilities.

M.ship form 2 copy

Aadhaar card 2 copy

Disability certificate 2 copy

U D I D card 2 copy

2 passport size photo

M.fee Rs.225/-

The General Secretary

NFB Kerala

12/470, Manjapra Road

Near Kalady Police Station

Kalady P O, Ernakulam-683574

Mob:9400468906

