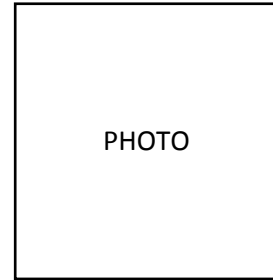


RAMAN SCIENCE CENTRE, NAGPUR

Application for membership of the centre

Membership category

- Student
- Teacher
- Individual adult
- Family
- Institution (Educational/Research organisation)



(Please fill in the following in BLOCK letters)

Name: _____, Sex: _____

Date of Birth : _____, Age: _____

Address: _____

_____ PIN: _____

Telephone (LL): _____ (Mobile No.) _____

e-mailID: _____

School name : _____ Class: _____

Particulars of membership Fee:Rs. _____ Cheque No. / DD No. _____

I / We have read the rules of this Membership and promise to abide by them.

Signature of the Applicant

Note: Membership is effective for one year from the Date of the submission of the application.
Membership fee is subject to change.

For Office Use Only

Fee Details: Amount _____, Receipt No _____, Sign of Cashier _____

Effective period of membership: From _____ To _____

Membership No. _____, Card No : _____

Admit as : Student, Teacher / Individual Adult / Family / Institutional / Corporate – member.

Signature of Issuing Officer