Ledger No.

Emp. No.

I.A.A.I. Staff Co-operative Thrift & Credit Society Limited Regional Headquarters (NR) AAI Operational Office, Rangpuri, Gurugram Road, New Delhi-110037

(Regd. No. 456 U), Phone : 011-25652019, Email : society_airport@yahoo.com

APPLICATION FOR MEM	BERSHIP Dated
The Honorary Secretary.	
I.A.A.I. Staff Co-operative Thrift & Credit Society Ltd. New Delhi-110037	
Dear Sir, Ibeg t	o apply for admission as a member of the
I.A.A.I. Staff Co-operative Thrift & Credit Society Ltd. Regional I Rangpuri, Gurugram Road, New Delhi-110 037 from	
I have carefully read the rules and bye laws of the society not a member of any society, the liability of which is unlimited and.	and hereby agree to abide by them. I am
I declare that I haveoutside debt of which are given below :	
Amount of debtRa	ate of interest per annum
I request that the Managing Committee will allot me	,
Rs. 10/- each and hereby agree to accept to accept the same or any	
to me. The shares money may be recovered in full / in two instalme	,
I also beg to nominate my (relation)	
Name	
Address	•
as the person or persons in interest of whom I wish to nominate on	account of my holding in society.
I agree to pay Rsper mensor or	n account of monthly saving deposit.
I also authorise my disbursing office AAI (IAD) New Delhi	-110 037/AAI (IAD) H.Q. Gurugram Road,
New Delhi to deduct from my pay monthly deus of the society and r	emit the same to you at my cost.
FATHER'S/HUSBAND'S NAME	Yours faithfully,
Date of Birth of the member	Signature
Office in which employed IAAI (IAD)	•
Present Address AAI	Name
Pay Rs	
Deduction if any on account of (i) CPF & (ii) Postal Insurance	Designation

.....in the office of AAI (IAD)..... (PERSONAL MANAGER)

Dated.....

DECLARATION

This to declare that I am	a Share holder of a IAAI Staff Co-operative	e Thrift & Credit Society Ltd.
Regional Headquarters (NR), A	Al Operation Offices, Ranpuri, Gurugram-11	0 037.
The following declaration	n, I have furnished to the society to true and c	orrect to the best of my knowledge.
	Designation	
	, Permanent	
	Age according to S/Book	
Father's Name		
Nominee with Name, Age		
Witness : Signature	Witness : Signature	Verified by
1. Name		
	Designation	