



(Regd.)

HUMAN RIGHTS PROTECTION AND ANTI CORRUPTION ORGANIZATION

मानवाधिकार सुरक्षा एवं भ्रष्टाचार निरोधक संगठन

Address : J-46, IInd Floor Gali No.12, Ramesh Park Laxmi Nagar, Delhi-110092

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MEMBERSHIP FORM

S.No. _____

POST : _____

FULL NAME : _____

FATHER'S/HUSBAND NAME : _____

ADDRESS : _____

ADDRESS (OFFICE) : _____

MOBILE NO.: _____ (OFFICE) : _____

AGE : _____ DATE OF BIRTH : _____

EDUCATIONAL QUALIFICATION : _____

NATIONALITY : _____ LANGUAGES KNOWN: _____

SOCIAL STATUS : _____

ADDITIONAL INFORMATION : _____

WEATHER INVOLVED IN ANY CIVIL/CRIMINAL CASE (YES/NO) _____

IF YES GIVE DETAILS : _____

MEMBERSHIP FEES Rs. 1500/- PAID BY CHEQUE/ D.D. IN FAVOUR OF (HUMAN RIGHTS PROTECTION AND ANTI CORRUPTION ORGANIZATION DELHI)

CHEQUE/D.D. NO: _____ DATE _____ BANK _____

I HEREBY PLEDGE TO UPHOLD THE CONSTITUTION OF INDIA & SPREAD THE OBJECTIVE & IDEALS OF HUMAN RIGHTS PROTECTION AND ANTI CORRUPTION ORGANISATION FOR UNITY, INTEGRITY, PEACE & PROGRESS IN THE COUNTRY THEREBY FULFILLING CIVIL LIBERTY'S & HUMAN RIGHTS.

Note: PLEASE ATTACH A COPY OF ID & Address Proof (AADHAAR / VOTER ID / LICENCE)

SIGNATURE

For Office Use Only

MEMBERSHIP/SR. NUMBER	DATE	SECURITY CODE	CARD/ID NO.	REFER BY	APPROVED BY