



Paschim Banga Vidyalaya Paridarshak Samity

Individual Membership Form (Fresh)

(To be submitted in triplicate to CEC)



District:	
Name in BLOCK Letters:	
Designation:	
Presently Posted at (Please specify if on deputation):	
Present Posting since:	
First date of joining in the Service as Inspector:	
Qualification with Subject:	
Mobile No.:	
Email:	
Present Residential Address (with District & PIN Code):	
Permanent Residential Address (with District & PIN Code):	
Date of Birth:	
Blood Group:	
Were you previously a member of the Paschim Banga Vidyalaya Paridarshak Samity? (Yes / No)	
What are your expectations from the Paschim Banga Vidyalaya Paridarshak Samity?	

I do hereby declare that I have full belief and confidence in the aims and objectives of **Paschim Banga Vidyalaya Paridarshak Samity** and I do hereby declare my wholehearted commitment to the cause of the said **Samity**. Accordingly, I am glad to accept the membership of **Paschim Banga Vidyalaya Paridarshak Samity** and I hereby declare that I shall abide by the rules and regulations of the **Samity**, shall regularly pay the subscriptions/donations, as may be required to be paid from time to time and will refrain to act/speak in any manner prejudicial to the interests of **Paschim Banga Vidyalaya Paridarshak Samity**.

Signature with date:

Recommended and forwarded to the Central Committee for record.

Signature of District President

Signature of District Secretary

Accepted and entered in the membership list.

Signature of General Secretary