

EAST DELHI SAHODAYA COMPLEX

APPLICATION FORM FOR NEW MEMBERS

No. _____

Name of the School	
Address with Pin code	
Contact No. (s)	
E-mail I.D.	
Name of the Principal/ Head of the School	
Contact No.	
E-mail I.D.	
Level of the school	Secondary <input type="checkbox"/> Senior Secondary <input type="checkbox"/>
Year of Establishment	
Name of the Trust/Society	
Total No. of students	
Total No. of staff members	
Total area of the school	
Sports facilities available (give detail)	1. 2. 3. 4. 5. 6.

Size & capacity of auditorium	
Is the school a member of any Sahodaya?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, give detail	
Payment details : Membership Fee : Rs. 1,000/- Annual Fee: Rs. 2,000/-	
Demand Draft /Cheque No. date..... for Rs. in favour of East Delhi Sahodaya Complex	
Declaration: <ul style="list-style-type: none"> * The Principal of the School will attend the meetings organized by East Delhi Sahodaya Complex. * The Principal assures that the school will actively participate in the Sahodaya Inter School activities/competitions organized from time to time. * The school will abide by the rules of East Delhi Sahodaya Complex. * The school will pay annual subscription fee regularly, if any. 	
Name & Signature of the Principal:	
Date :	
Place :	

<u>FOR OFFICE USE ONLY</u>	
Date of receipt of the Application form:	_____
Date of confirmation of Membership :	_____
Membership number allotted :	_____