

LEO CLUB OF INDORE 2018-19



		Membership Forn	n	
Date:				
I, the undersigned, in goo	d standing in my sch	ool and or community, an	d in accordance with	
the Constitution and By I	Laws of this Club, he	r <mark>eby apply for m</mark> embersh	ip in the Leo Club of	
Indore.				
Name of the Candidate:				
Address:			Ci	ty:
Postal Code:	State:	Country: _	Landli	ne:
Mobile:	Email I	d:		
Age: [OOB:	Anniversary:	Blood (roup:
Spouse Name:		DOB:	Mobile:	
Blood Group:	Children's Name	with DOB:	//%	
Hobbies & Interests:			1/ 3	
Other Organization of wh	ich I am a Member: _			
Parent Or Guardian Name			Mobile	
Address City & Postal Cod	le:			
Schooling From:				
Graduation & Degree Obta	ained:	UKENE		
Post Graduation & Degree	e Obtained:			
Occupation:		Firms Name:		
Designation / Your Activi	ty:	/		
Brief Family Background:		SUB OF		

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Reasons To Join Leo Club Of Indore:	
Introduced By LEO:	Ex LEO:
I believe the above information to be true, and	I desire membership in this club. I believe I can make a contribution to th
Club and be worthy of the friendship of its mer	nbers. I understand the Entrance Free will be Rs. 500/- (Five Hundred) pe
member and the Annual dues will be Rs. 6500,	<mark>/- (for single) and 13</mark> 000 (for cou <mark>pl</mark> es). If the member is removed from th
club during the probation period the club shall	retained Rs 1500/
Date: Place: Si	gnature of the Candidate:
OPTIONAL:(To be completed by parent or guard	dian w <mark>here parenta</mark> l permissio <mark>n</mark> is required by law for minors): I hereby giv
permission for my son/daughter to become a me	mber of the above-named Leo <mark>C</mark> lub. Sig <mark>na</mark> ture:
F	FOR OFFICE USE ONLY
Return this form on or before	To Mr.
Leo Club Advisor:	Address:
City, State	e and Postal Code:
Approved:	Date:
Chairman, Membership Committee	
Enclosures & Check List:	
1. Cash for Rs:	
2. Date:	
3. Two Passport size photographs (If Applicable	e: Please include photographs of Spouse, Child also)
4. Photocopy of Age Proof (preferably passport)	

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