



B. P. S. Sports Club

B. P. S. Road, Pajifond – Margao, Goa
Tel: 2714690

Two ID size
photos &
Copy of
Aadhaar card

Application Form for Membership

I, Mr. /Mrs./Miss. _____ wish to become a PATRON/ DONOR /LIFE / ORDINARY member of the B. P. S. Sports Club and do hereby agree, if accepted, to abide by the Constitution, Rules and Bye-Laws of the Club as now existing or they may stand amended from time to time.

Profession / Occupation:- _____

Educational Qualifications:- _____

If employed, state full designation, position in the company and name of the company:-

If self employed, Name and nature of the business:- _____

Date of Birth:- _____

Father's name :- _____

Mother's name:- _____

If married, Wife's / Husband's Name:- _____

Name of Children:-

1. _____ Age _____ M/F _____

2. _____ Age _____ M/F _____

3. _____ Age _____ M/F _____

4. _____ Age _____ M/F _____

Address to be registered with the Club for all communication:

E-mail:- _____ Tel _____ Mob. _____

Note:- Children above 26 years of age are not eligible to avail of facilities offered to their parents as members of the Club.

Games regularly played :- _____

Any outstanding sporting achievements:- _____

Name of the clubs where candidate is a member :- _____

Date:- _____

Signature of Applicant

Name of Proposer _____ Mem No. _____ Sig. _____

Name of Secunder _____ Mem No. _____ Sig. _____

(Proposer and Secunder should know the Applicant well)

Type of Membership:

- 1. Life Member Rs. 2,00,000.00 + 18% GST = **Rs. 2,36,000.00**
- 2. Life Member - for members children only Rs. 1,00,000.00 + 18 % GST = **Rs, 1,18,000.00**
- 3. Patron Rs. 5,00,000.00 + 18 % GST = **Rs. 5,90,000.00**
- 4. Corporate membership Rs. 5,00,000.00 + 18% GST = **Rs. 5,90,000.00**
for maximum
of three Directors/ Partners/Trustees or
Officers of a Company or Partnership
firm.

VERY IMPORTANT

The candidate must ensure that the completed application form is accompanied by a cheque for the membership fee, two recent ID-sized photographs, and a copy of the Aadhar card. Incomplete form(s) will not be accepted. He or she may be asked to appear before the Managing Committee before the application is considered.

(For Office use only)

Membership application accepted / rejected at the Managing Committee meeting held on _____

President

Hon. Secretary

Date.

Payment Details:

R.No. _____ Date: _____ Signature: _____

By Cash /Cheque No. _____ Bank: _____