

## Exploitation Removal Board शोषण उन्मूलन परिषद् (An NGO recognized by Government)

H.Q.: 566, Nanak Bhawan, Chanderlok, Shahdara, Delhi-110093 Tel.: +91 9810220873 | +91 9810614508

E-mail: ngo.erb@gmail.com

MEMBERSHIP No.

## **MEMBERSHIP FORM**

Applicant's Name :			
Father's/Husband's Name:			
Date of Birth:	Category	/:	
Aadhar Number:	PAN Car	d No. :	
Contact No.:	E-mail i.d	l.:	
Qualification:			
Address:			
Occupation:			
Experience (in Social Field)			
	UNDERTAKING		
Above infromations are given by me as trumembership of General Body Member / Soc For that purposes, I accept all rules and membership in any forms other than social a	sial Worker / Patron Committee / Leg regulations of Exploitation Remo	gal Advisory Board / Life Membership.	
Signature	Signature	Signature	
VERIFICATION  (To be signed by any Member of ERB/ Respectable Person of Society)			
Certified that I have known Mr./Mrs./Ms	for t	he last years and that to the best of of the applicant is signed in my presence for	
Dated:	Signature :		
Place :			