



ABHIMANI FOUNDATION

Invitation-Application For Membership

(This is not Just Membership Form. For us, your association with the Abhimani Foundation Charitable Voluntary Organisation, a not for profit making Organisation of India. Will mark the beginning of a revolution to alleviate Poverty by the poor people themselves for we request you to spare a few moments of your time. Read this carefully and furnish us with the information required)

Name: _____

Member Sponsor: _____

First Name: _____ MI: _____ Last Name: _____

Gender: ☐ Male ☐ Female Occupation: _____

Date of Birth: _____ Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

I am a: ☐ New Member

Enclosed is Rs. _____ as an **Donation** for charitable activities conducted by the Abhimani Foundation as a Annual/Life Donor member

I accept membership into Abhimani Foundation Charitable activities as a Donor and that the standards are limited to persons of good moral character and reputation. I recognize the importance of rendering personal service to my community in cooperation with other civic-minded persons. I understand that Donor/ membership is not valid until approved by the Founder & Chairman, Abhimani Foundation, Bobbili.

Date: _____

Place: _____

Signature _____

***ALL DONATIONS made TO "ABHIMANI FOUNDATION" are exempted U/S 80G(5)(VI) OF INCOME TAX ACT,1961**

For Founder & Chairman use: I confirm that the Trust members has approved this member for Donor member in this ABHIMANI FOUNDATION charitable Services.