

**JOIN YOUR ALUMNI ASSOCIATION — “SHRUNKHALA”**

**SES’S L. S. RAHEJA COLLEGE OF ARTS AND COMMERCE**

JUHU ROAD, SANTACRUZ (WEST), MUMBAI – 400 054.

E-MAIL : [contactus@lsraheja.org](mailto:contactus@lsraheja.org) WEBSITE : [www.lsraheja.org](http://www.lsraheja.org)

**ELIGIBILITY**

Membership of the Association shall be open to any past student of L. S. Raheja College of Art & Commerce, Mumbai, who has kept terms for not less than one academic year, and whose name is not on the current rolls of the students of the College still studying for graduation.

**MEMBERSHIP CATEGORIES**

**Local Students**

There shall be three categories of Members of the Association namely,

1. **Ordinary Member** - who shall pay a subscription of Rs. 100 as yearly subscription.
2. **Life Member** - who shall subscribe Rs. 3000 in one lump sum.

**MEMBERSHIP PROCEDURE**

- a. **Cheques to be drawn in favour of “SHRUNKHALA - Alumni Association”.**
- b. Membership shall be considered for the eligible person on making an application in the prescribed form and on payment of prescribed subscription.
- c. Member admitted to the Association shall have full voting rights.

Sd/-  
PRINCIPAL

# **“SHRUNKHALA” ALUMNI ASSOCIATION**

## **APPLICATION FOR MEMBERSHIP**

The Principal,  
L. S. Raheja College of Art & Commerce,  
Juhu Road, Santacruz (West),  
Mumbai - 400054.

Dear Madam,

I, wish to apply for Ordinary / Life Membership of the Association.  
The required particulars have been furnished overleaf.

I, agree to abide by the Memorandum of Association / Constitution and the bye-laws / rules, of the Association.

Enclosed is the Ordinary / Life Membership fee amounting to \_\_\_\_\_ in \$ U.S. / Rs.

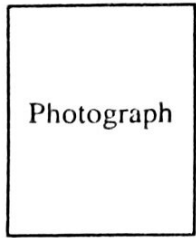
(\* Delete one of two categories under and one currency as desired)

Yours sincerely,

Signature

Date : \_\_\_\_\_

**PERSONAL DETAILS**



**Name:** \_\_\_\_\_  
(First) (Middle) (Last)

**Date of Birth:** \_\_\_\_\_

**Studied at L.S. Raheja College:** From Year \_\_\_\_\_ To Year \_\_\_\_\_  
of Arts & Commerce Year of  
Stream \_\_\_\_\_ Passing \_\_\_\_\_

**Sex:** \_\_\_\_\_ **Marital Status:** \_\_\_\_\_ **No. of Children:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_  
\_\_\_\_\_  
(City) (Pin Code) (State) (Country)

**Current Address:** \_\_\_\_\_  
\_\_\_\_\_  
(City) (Pin Code) (State) (Country)

**E-mail:** \_\_\_\_\_ **Res. Tel.** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Work Details**

**Company Name:** \_\_\_\_\_

**Nature of Business:** \_\_\_\_\_ **Designation:** \_\_\_\_\_

**Office Address:** \_\_\_\_\_  
\_\_\_\_\_  
(City) (Pin Code) (State) (Country)

**E-mail:** \_\_\_\_\_ **Office. Tel.** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Preferred address for correspondence :**

Permanent \_\_\_\_\_ Current \_\_\_\_\_ Office \_\_\_\_\_

**Date:** \_\_\_\_\_ **Place:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Received \_\_\_\_\_ Intimated \_\_\_\_\_

Cash / Cheque / Draft - Amount \_\_\_\_\_ No. \_\_\_\_\_

Dated \_\_\_\_\_ Drawn on \_\_\_\_\_ Receipt No. \_\_\_\_\_

Dated \_\_\_\_\_ Membership No. \_\_\_\_\_