



LRC Alumni Membership Form

Alumni

Associate Alumni

Name: _____

ID No: _____

Office Address: _____

Phone No: _____

Residence Address: _____

Phone No: _____

Email ID: _____

Cash to be paid:

Description	Alumni	Associate Alumni
Security Deposit (non-interest bearing & refundable)	₹ 10,000	₹ 10,000
Annual Membership Fee*	Nil	₹ 2,500
Identity Card Fee*	Nil	₹ 100
Total	₹ 10,000	₹ 12600

* GST is applicable on both these amounts.

Mode of Payment:

Cheque

DD

Cheque or DD No: _____ **Bank Name:** _____

Applicant Signature: _____

Name of the LRC Staff: _____ **Signature of the Staff:** _____

Acknowledgement – LRC Membership

This is to acknowledge your payment of INR (_____) towards refundable security deposit, annual fee and ID card processing fee. Please intimate us one month in advance in case you would like to withdraw your membership with the LRC.

Name of the LRC Staff: _____ **Signature of Staff:** _____

Date: _____

Mode of Payment - Cheque / DD No: _____

[Please tick appropriate option]