



VISTEEL MAHILA SAMITI

UKKUNAGARAM

VISAKHAPATNAM-530032

APPLICATION FOR ADMISSION AS A MEMBER IN VISTEEL MAHILA SAMITI

NAME :

HUSBAND'S NAME :

EMPLOYMENT NO. :

ADDRESS & TEL NO. :

DATE OF BIRTH :

DATE OF MARRIAGE :

HOBBIES :

PROPOSED BY :

SECONDED BY :

I have read the rules of the VISTEEL MAHILA SAMITI. I wish to enroll myself as a member and I shall abide by the rules.

Signature:

Date :

I Agree for deduction of annual subscription of my wife ..... from my salary during April of every year.

Signature of Husband :

Date :

Kindly Note: Membership is open only to the wife of RINL-VSP executives.