

ASSOCIATE FAMILY MEMBERSHIP FORM (A3)

State Bank of India Pensioners' Association Kerala

(Reg. No.ER/450/2001)

Website: www.sbipensionersassociationkerala.org E-Mail: sbipensionersassociationkerala@gmail.com

To: The General Secretary SBI Pensioners' Association Membership No. Kerala C/o. State Bank of India Photograph Photograph of ASSOCIATE FAMILY of Life Thiruvananthapuram Main Pensioner PENSIONER Branch Opp. AG's Office, MG Road Thiruvananthapuram 695 001 Mobile: 94473 14517 Dear Sir, APPLICATION FOR ASSOCIATE FAMILY MEMBERSHIP LIFE PENSIONER MEMBERSHIP NO:_____ LIFE PENSIONER NAME: I, the undersigned, _ (Full Name in BLOCK CAPITALS) Spouse of the above SBI Pensioner hereby apply for Associate Family Life Membership of the Association. I declare that I have read and understood the Constitution and Bye-Laws of the Association and I/We undertake to abide by the same with whatever alterations/amendments and/or modifications that may be made from time to time. I shall pay any additional Levy/Contribution/Donation whenever it is required by the Association. I further declare that I am/are not a member of any other Bank Pensioners' Association. Necessary particulars are as follows: (IN BLOCK CAPITALS): **Full Name of the Associate Family Member** Date of Birth: D D Provident Fund Index No. of SBI Life Pensioner Br. Code: **Pension Paying Branch:** 5 Branch/Office of Life Pensioner from where retired:

7 Life Pensioner's Date of Retirement:

Life Pensioner Retired as (Designation):





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Mer	Membership Fee: Single: Rs.500/- (Associate Member Life Membership Fee) Credit the Amount to SBI Pensioners' Association Kerala SBI, PETTA Branch (Code No.12854) IFS Code: SBIN0012854 - A/c. No. 10021921558). While Depositing by Cash / Transfer give your PF NO and Nam of ASSOCIATE FAMILPENSIONER in the Narration field, this is mandatory. please furnish the following details: i) Date of Credit:															m•																							
iii) Remitting Branch Name with Code:iv) Remitting Branch Codev) Transaction/Journal No.																								1	T	\top				_									
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In case payment is made online, the application with the above details may be sent to the General Secretary by post and a scanned copy/photograph of the application may be sent to him through WhatsApp to his Mobile No. 94473 14517. Alternatively, the scanned copy/photograph may be emailed to the Association at the email id given above.															m																								
Place:														Signature of Pensioner									Signature of Spouse																
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