



MEMBERSHIP FORM (A1)

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 Kerala
C/o. State Bank of India
Thiruvananthapuram Main Branch
Opp. AG's Office, MG Road
Thiruvananthapuram 695 001
Mobile: 9447018299

Photograph of Pensioner

Photograph of Spouse

Membership No. grid with L M / and A F M /

APPLICATION FOR LIFE MEMBERSHIP/ASSOCIATE FAMILY LIFE MEMBERSHIP

Dear Sir,

I/We the undersigned (Full Name in BLOCK CAPITALS), Pensioner of State Bank of India and (Spouse) hereby apply for Life Membership/Associate Family Life Membership of the Association. I/We declare that I/We 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/We shall pay any additional Levy/Contribution/Donation whenever it is required by the Association.

I/We further declare that I/we am/are not a member of any other Bank Pensioners' Association.

A Cheque/Draft for Rs. bearing No. dated drawn on is enclosed. (Please ignore if paid direct/online.)

Necessary particulars are as follows (IN BLOCK CAPITALS):

1 Full Name of the Pensioner:

Name grid

2 Date of Birth:

DDMMYYYY date grid

3 Provident Fund Index No.

Index number grid

4 Pension Paying Branch:

Branch name grid

Br. Code:

Branch code grid

5 Branch/Office from where retired:

Branch name grid

6 Retired as (Designation):

Designation grid

7 Date of Retirement:

DDMMYYYY date grid

8 Full Address:

	Pin Code:

Residence Telephone:

Mobile No.

Email ID:

9 Details of Spouse:

a) **Name:**

b) **Date of Birth:**
D D M M Y Y Y Y

c) **Mobile No.**

d) **Email ID:**

Membership Fee:

Single: Rs.1,600/- (Life Membership Fee Rs.1,500/- + Admission Fee Rs.100/-.)

Family: Rs.2,100/- (Life Membership Fee for Self Rs.1,500/- + Associate Membership Fee Rs.500 + Admission Fee Rs.100/-)

Cheque/Draft shall be payable to **SBI Pensioners' Association Kerala** and drawn on **SBI, PETTA Branch** (Code No. **12854** - IFS Code: **SBIN0012854** - A/c. No. **10021921558**).

If paid directly/online, please furnish the following details:

i) **Date of payment:**
D D M M Y Y Y Y ii) **Amount:** Rs.

iii) **Remitting Branch Name with Code:**

iv) **Transaction/Journal No.**

In case payment is made directly/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. 9447018299. Alternatively, the scanned copy/photograph may be emailed to the Association at the email id given above.

Place:

Date

**Signature of Pensioner
(Applicant)**

**Signature of Spouse
(Applicant)**

For Office Use

Admitted as Life Member (LM No. _____) / Associate Family Life Member (AFM No. _____)

Date

President

General Secretary

Note: If both the Pensioner and Spouse were employees of SBI, they have to apply for Life Membership individually (i.e. Rs.1,600/- each).