

ESTD: 1984

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Phone: 2661 9035

Karnataka Unaided Schools' Managements' Association (R.)

Regd. Office: No. 9 Vanivilas Road, V.V. Puram, Bangalore - 4

APPLICATION FORM FOR MEMBERSHIP

(For Managements of Recognised Schools only)

1. Full name of the person and particulars of designation he/she holds in the Management represented and the full address of the Management (Association) with telephone number, if any.	
2. Full address of the Institution run by the Management	
3. Particulars of the Management: a) Date of establishment b) Nature of activities c) Any other particulars	
4. Class of membership applied for life membership / Annual membership	
5. Amount of membership-fee and Registration fee paid along with receipt number and date	

PERSONAL DECLARATION

I have gone through the terms and conditions of membership of KUSMA as specified in the Memorandum and Bye - laws and promise to abide by them. I have enclosed the resolution of our Managing Committee authorizing me to apply for the life/ annual membership of the Association.

Date:

Signature of the Member

Secretary's Remarks:

Orders of the Executive Committee: