FORM X

Member Enrollment Form

Amrut Homes Homebuyers Association

First Name:	_		
Last Name:	_		
Fathers/Husbands Name:	_	Photo	
Date of Birth: DD / MM / YYYY		(Paste Here)	
Tower: Flat No:			
E-mail:	_		
Mobile:			
Aadhar Number:	(Attach	(Attach Front / Back)	
N Card: ((Attach Copy)	
Permanent Address:			
 Preferred Mode of Contact: E-mail Mobile I hereby give my consent to become the member of A Association and certify that: - I will abide by the bye laws of the society as approxime to time. I have not been convicted of an offence involving involving imprisonment. 	mrut Hom olicable an	d amended	
Dated: Place:	Yours f	aithfully	
(S	ignature c	of the Applicant)	