



# Jazba Foundation

(Registered Under Society Registration Act 1860)

Address: Opp Sabarya Garden, Khair Road, Aligarh - 202001 (UP)  
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## MEMBERSHIP APPLICATION FORM

To,  
**The Honourable Secretary General,  
Jazba Foundation**

Dear Sir,  
I hereby apply for Volunteer/Active Membership of Jazba Foundation.

I am sending my subscription fees of ₹. .... by Cash/Cheque/DD/ through ..... I have carefully read memorandum, Rules and Bye-Laws of the Foundation and agree to abide by them. Please enroll me as Member of Jazba Foundation. My particulars are given below.

Affix your recent  
Photograph  
with signature

### To be filled by the applicant (To be Filled in Capital Letters)

Please read the deed of discharge, release and indemnity and guidelines before filling up the form

#### Personal Information:

Name:

Father's Mother's/Husband's Name:

Date of Birth:       Sex: Male ☐ Female ☐ Blood Group  Married ☐  
Unmarried ☐

Address:

City:  State:  Country:

Postal Code:

Telephone Res (with std code):  Mobile No.

Office (with std code):  Aadhar No.

E-mail:  PAN Card No.:

Qualification  Profession  Nationality

#### Please attach self attested copy of any one

☐ Passport ☐ Aadhar Card\* ☐ Election Card ☐ Driving Liscense

#### Three Recent Photographs with signature on the back of 3rd photo

#### Deed of Discharge, Release and Indemnity:

- 1). The member agrees to follow by the rules of Jazba Foundation at all times.
- 2). Release and Discharge: The member release, discharges, waives and forever holds statuary harmless from all claims or for any loss sustained by the member whether caused by Jazba Foundation negligent member wilful act or omission, breach of contract, breach of duty or otherwise in connection with .....
- 3). Indemnity: The member indemnifies member against all claims for any loss sustained by the member whether caused by Jazba Foundation negligent act or wilful act or omission, breach of contract, breach of contract, breach of statuary duty or otherwise in connection with Jazba Foundation
- 4). Warranty as to Age: By personally executing this deed, the candidate warrants that he/she is atleast of 18 years.
- 5). Bar to Action: The candidate agree that this deed may be pleaded as a bar to pay action, suit or proceedings taken at any time by the candidate against Jazba Foundation arising out of or as a consequence of Jazba Foundation or any incidental activities.
- 6). Confidentiality: The candidate must keep the terms of this deed strictly confidential and no disclosures of the terms of this deed is to be made by the candidate other than for the purpose of obtaining legal advice.
- 7). Definitions: In this deed, unless inconsistent with the context and subject matters "All claims" means all claims, actions, suit,

demands, damages, interest and costs arising out of or as a consequence of Jazba Foundation including any incidental activity "All loss" means any loss, damage or injury to person (including candidate) or property included but not limited to any.

8). Signatures: Signatures executed as a deed.

I..... wish to become a member of Jazba Foundation I understand that the process requires my application to be approved by the board members of Jazba Foundation.

*"I hereby solemnly and sincerely affirm that the information along with the documents furnished by me in the application form is true and correct. I have not concealed any information. However if any information furnished hereby is fraudulent, incorrect or untrue, I understand that I am liable to criminal prosecution and I also agree to forego my membership of Jazba Foundation. Further that the membership of Jazba Foundation is liable to be cancelled.*

*I have read the deed of discharge, release and indemnity and agree to abide by it"*

Place: \_\_\_\_\_

Date : \_\_\_\_\_

Signature of the Candidate

**For office only City/District/Division/Zone/State Body of Jazba Foundation**

This is to confirm that the information given by the candidate in the application has been checked for validity and that the documents enclosed have been verified. The candidate is found suitable for the membership of Jazba Foundation

Signature of the ..... (Designation) .....

City/District/Division/Zone/State Body .....

Jazba Foundation

**For office only City/District/Division/Zone/State Body of Jazba Foundation**

☐ The candidate is found eligible for the membership of Jazba Foundation and is nominated as the .....  
at .....for..... years.

OR

☐ The candidate's application has been rejected

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Membership No. Allotted: .....

Dr. Swaleheen Akhtar  
(Gen. Secretary)

**Note -**

*\* Is compulsory document*

*- Active Member will have to pay Rs. 1500/- subscription fees for lifetime.*

*- Volunteer will have to pay Rs. 500/- subscription fees annually.*