

**THE UNITED CHRISTIAN WELFARE SOCIETY
JALANDHAR [PUNJAB, INDIA]**

UCS Membership Form

Please fill out this form to become a part of our membership (Registration fee 500 Rs.)

First Name: _____ Surname: _____

Date of Birth: ___/___/_____ Occupation/Job _____

PAN Number:

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Aadhar Card Number:

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Address: _____

How much support can you give for the children per month:

Rs 500 / month

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| |
| |

Rs 750 / month

Rs 1000 / month

Any other payment you want to make for the students: _____

Print Name: _____

[Signature]

Date: ___/___/_____
