

# INDIAN ADULT EDUCATION ASSOCIATION NEW DELHI

## APPLICATION FORM FOR LIFE MEMBERSHIP

Paste your Passport  
photograph attested by  
a Gazetted Officer or  
a member of the  
EC of Association

Specimen Signature

### The General Secretary

Indian Adult Education Association  
17-B, Shafiq Memorial, Indraprastha Estate,  
New Delhi - 110002

Dear Sir/Madam,

I am deeply impressed with the aims and objectives of the Indian Adult Education Association for promoting the cause of adult education in the country. I am very much interested in the movement and would like to join the Association. I am sending LIFE/ANNUAL membership fee as per rules of the Association.

1. Name: Mr./Mrs./Miss./Dr. \_\_\_\_\_  
(in Block Letters)

2. Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

3. Academic Qualification \_\_\_\_\_

4. Profession \_\_\_\_\_

5. Complete mailing address with Pin code \_\_\_\_\_

(a) Office Address \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_ Pin Code \_\_\_\_\_

6. Telephone Nos. (Off.) with STD Code \_\_\_\_\_ Tele. No. \_\_\_\_\_

Fax No. \_\_\_\_\_ Mobile No \_\_\_\_\_ E-mail \_\_\_\_\_

7. Adult Education Activities \_\_\_\_\_

8. Any other relevant information \_\_\_\_\_

9. Choice of one Journal which may be  
Sent to you free of cost along with Newsletter  
(tick any one)

1. Indian Journal of Adult Education
2. Proudh Shiksha (Hindi Monthly)
3. IAEA Newsletter (English Monthly)

Complete Address at which the Journal should be sent \_\_\_\_\_

10. Amount Paid in Rs

Cash/DD (Rs. 2000/- Life Membership, Rs. 100/- Annual Fee/ with an Admission fee of Rs. 50/-) and Identity Card charges Rs. 50/-. I am enclosing herewith the two passport size photographs. (Total Amount Rs. 2100/- only)

DD No. \_\_\_\_\_ Date \_\_\_\_\_ Bank \_\_\_\_\_

I have read the Memorandum of Association and Rules and Regulations of the Association and agree to abide by them.

Place \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Proposed by

Second by

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Name & Address (in BLOCK LETTERS)

Name & Address (in BLOCK LETTERS)

Membership No. \_\_\_\_\_

Membership No. \_\_\_\_\_

*(Only IAEA Members are eligible to Propose and Second)*

**FOR OFFICE USE ONLY**

1. Name of the Regional Branch \_\_\_\_\_
2. Date of Receipt \_\_\_\_\_
3. Receipt No. \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_
4. Date of the Meeting of he Sub-Committee \_\_\_\_\_
5. Date of the Meeting of the Executive Committee \_\_\_\_\_
6. Admitted/Rejected \_\_\_\_\_
7. Membership No. \_\_\_\_\_
8. Date of intimation to the applicant \_\_\_\_\_
9. Identity Card sent on \_\_\_\_\_

**Office Superintendent**

**General Secretary**

Please enclose 2 Passport size photograph for issuing of Identity Card