

MEMBERSHIP APPLICATION FORM



(Regd. with Ministry of Corporate Affairs, Govt. of India)

📍 Kasia Road, Corporation Bank Building, Front of Skylark Hotel Ground Floor Padrauna, Kushinagar - 274304, U.P. (INDIA)

☎ +91 9115 330 222 🌐 www.hrdnl.com ✉ support@hrdnl.com

(To be filled by the Applicant, Use Block Letter/Tick where applicable)

To,
The Director
HRD NIDHI LIMITED
I, Shri/Smt./Miss opt to be

Date: ___/___/20___

Affix
Self-attested
Passport Size
Photograph

member in HRD Nidhi Limited and my detailed particulars are as following:

Full Name:

Father's/Husband's Name:

Mother's Maiden Name: D.O.B.: ___/___/___ Gender: Male Female

Present Address:

District: State: Pin Code:

Permanent Address:

District: State: Pin Code:

Aadhaar No.: PAN No.: Mob. No.:

Email: Nationality:

Occupation Salaried Self Employed Self Employed Prof. Retired Homemaker Politician

Student Others, please specify

If salaried, employed with: Private Sector Public Sector Government Multi National Company

Gross Annual Income in INR <50,000 50K-1Lac 1Lac-3Lac 3Lac-5Lac 5Lac-10Lac >10Lac

Residence Type: Owned Rented/Leased Ancestral/Family Company Provided

I have attached latest copy of following as Proof of Identity:

Passport PAN Card Voter ID Card Driving License Aadhaar Card

I have attached latest copy of following as Proof of Address:

Passport Bank Account Statement Telephone/Electricity Bill Driving License Aadhaar Card

DECLARATION BY APPLICANT

I hereby declare that I voluntarily opt to be a member in HRD NIDHI LIMITED shall abide by the existing rules & regulations of the company & also the amendments as may take place from time to time. The declaration is made by me is correct & I have been explained everything related to the membership in language known to me.

Place:

Date:

.....
Signature / Thumb Impression of Applicant

DECLARATION IN CASE OF APPLICANT IS THUMB HOLDER

I S/O, D/O, W/O Mr.
resident of declare
that I have read out and explained the rules, regulations, terms and conditions of membership in detail to the applicant
Shri/Smt./Miss S/O, D/O, W/O Mr.
in local languages.

.....
Signature of Declarant

FOR OFFICE USE ONLY

I, Shri/Smt./Miss designation
with Employee Code of Branch has physically verified all the particulars
& relevant documents of the Membership Application of Shri/Smt./Miss and
Received Rs. vide receipt no.....on date towards the membership fee.
Applicant signed in my Presence.

Allotted Membership Number:

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Employee Signature

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Cashier / Office Assistant Signature

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Director Signature

TERMS & CONDITIONS

1. A person will become lifetime member once enrolled.
2. A person has to attach Duly filled Share Application Form with Membership Application Form.
3. A person has to affix his/her passport size photograph on Membership Application Form.
4. A person has to attach latest copy of address & identity proof with Membership Application Form.
5. The membership fee is Rs.10/- for Saving/Recurring Deposit Account holders and Rs.100/- for Fixed Deposit holders.
6. Minors cannot become member of the company.
7. The lunatics are also not eligible for membership in the company.
8. A member can open Savings/Recurring/Fixed Deposit account in the company.
9. Loan only will be granted to the members.
10. A member can avail loan on KVP/NSC/RD/FD/Govt. Bonds/Gold/Property from the company.
11. At the time of maturity, the specimen signature of the member will be tallied.
12. All disputes shall be governed by laws of India and shall be subject to exclusive jurisdiction of the courts at Kushinagar, Uttar Pradesh.

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Signature of Applicant