ಅಖಿಲ ಭಾರತ ರಕ್ಷಣಾ ವೇದಿಕೆ.(ರಿ)

AKHILA BHARATHA RAKSHANA VEDIKE (R)

Head Office: 389,Health Layout, Nagarabhavi ,Bangalore, Karnataka, India.
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Name Dr./Mr./Mrs./Ms. (IN BLOCK LETTERS)			Affix recent Passport size photo
Father / Husband Name			
Age		Gender	Occupation
Qualification		Area of specialization	
Address for correspondence			
Email ID			
Contact number			

Mode of payment : cash/DD/IPO no.	Date	Amount Rs .500.00 (five hundred only)

For office use only

Receipt No	Date	Date of placing before executive committee
Executive committee decision Recommended / Not recommended membership no.		

- I kindly agree to join ABRV and serve for the growth of nation sincerely & honestly.
- I won't misuse ABRV ,posting & it belongings for personal purpose .
- I won't create any issues or problems which brings bad name to Indian law, constitution , culture and public beliefs
- I won't make any problems to government, public and administration services .
- If any issues or problems found I'II bring it to the notice of committee members and discuss with them and solve the problems peacefully.
- I won't discuss or publish any secrecy , decisions taken and project of ABRV with any other sources or person.
- Without informing to higher officials or committee members of ABRV . I won't take any decisions and make any strikes and activities that creates public nuisance. If don't my membership can be cancelled without any prior notice and legal action can be taken on me.

Declaration : I am interested to join ABRV & develop strong nation . I agree to abide by the constitution and bye-laws of the Indian association and also contribute to our nation with ABRV Association.

Date :

Signature of Applicant