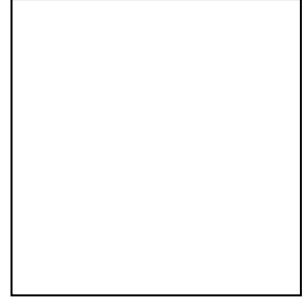




**ASSOCIATE MEMBERSHIP APPLICATION FORM**  
**(TO BE FILLED IN BLOCK CAPITAL LETTERS)**

The Chairman  
Rajendra Sinhji Army Mess and Institute Khadki  
C/O Stn HQ Kirkee/Aundh  
Nehru rd Khadki, Pune -03



1. I am regular commissioned retired officer/ Widow with pension of the Army/Navy/ Air Force. May I **request** you to kindly make me a Associate Member of RSAMI, Khadki on depositing of required Non Refundable deposit, Refundable Membership Security Deposit and annual subscription in this regard.

My particulars are given below:-

(a) No: \_\_\_\_\_ Rank: \_\_\_\_\_ Name: \_\_\_\_\_

(b) Date of Birth : \_\_\_\_\_ (c) Date of Commission : \_\_\_\_\_

(d) Date of Retirement : \_\_\_\_\_ (e) PPO No : \_\_\_\_\_ (Photocopy att)

(f) Present Address: \_\_\_\_\_

(g) (i) Permanent Address : \_\_\_\_\_  
: \_\_\_\_\_

(ii) Telephone No \_\_\_\_\_

(iii) Mob No \_\_\_\_\_ (for SMS Service of RSAMI- Only One No to be given)

(iv) E Mail ID: \_\_\_\_\_

(v) Alternate Mob No: \_\_\_\_\_

(h) Address/Property Proof. Index II of the property owned by the applicant/spouse/ dependents in Pune or Rent Agreement required to be att.

(j) Duration of stay in Pune:-

(i) Staying Since: \_\_\_\_\_ (ii) Likely to stay till: \_\_\_\_\_

2. I am willing to pay the laid down entrance fee (Rs \_\_\_\_\_)(Non refundable).

**UNDERTAKING**

3. I and dependent members of my family will abide by RSAMI Rules and Bye Laws and instrs given on Notice Bds/RSAMI Website or through Secretary, RSAMI, Khadki as issued from time to time. I am aware that an infringement on the above on my part or my dependents/guests will constitute a breach of trust and my membership of RSAMI may be terminated by Mgt of RSAMI, Khadki without notice.

Station: \_\_\_\_\_

\_\_\_\_\_  
(Signature of the applicant)

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

2 TO BE SPONSORED BY ASSOCIATE MEMBERS OF RSAMI, Khadki.

(I CERTIFY THAT I WILL HAVE FULL RESPONSIBILITY TO CLEAR ALL THE DUES, IN CASE OF ABOVE SPONSORED OFFICER/WIDOW DEFAULTS ON PAYMENT OF ANY DUES OF RSAMI)  
(IN BLOCK LETTERS)

Name: \_\_\_\_\_ Rank: \_\_\_\_\_ Membership No: \_\_\_\_\_

Address: \_\_\_\_\_

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

4. Other Particulars of Officer

(a) (i) Last appointment held: \_\_\_\_\_

(ii) Last Unit: \_\_\_\_\_

(b) Particulars of current: \_\_\_\_\_

(i) Employment if any after retirement

(ii) Name of employer and: \_\_\_\_\_

Address: \_\_\_\_\_

5. Particulars of spouse and dependent family members of applicant in terms of note to Para 13 of RSAMI, Rule, and Bye Laws, which reads that 'family' would include dependent parents (att Part-II Order of IHQ MoD (Army)) unmarried and unemployed daughters irrespective of age and sons up to age of 25 yrs. Employed or a married son and daughter irrespective of age will be treated at par with other Guest.

Ser No	Name	Date of Birth	Relationship	Occupation
(a)				
(b)				
(c)				
(d)				
(e)				

Station : \_\_\_\_\_

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

\_\_\_\_\_

( Signature of Applicant )

3. SPECIMEN SIGNATURE OF THE APPLICANT (Please sign in both columns)

Rank : \_\_\_\_\_ 1. \_\_\_\_\_

Name : \_\_\_\_\_ 2. \_\_\_\_\_

6. Note:-

(a) Rs 220/- (Non Refundable) is required to be deposited for Registration fee and cost of the form for membership. Draft/ Cheque should be issued in favour of **Rajendra Sinhji Army Mess & Institute, Kirkee.**

(b) Age proof/certificate of dependents is required to be attached with application (Birth certificate or School Leaving Certificate or Part II Order and IHQ MoD (Army) Part II Orders for dependent parents).

(c) Address/Property Proof. Index II of the property owned by the applicant spouse/dependents in Pune or Rent Agreement required to be attached.

(d) Photocopy of PPO to be attached.

(e) Two Passport colour photograph each of self and dependents is required to be submitted.

UNDERTAKINGS BY THE APPLICANT FOR ASSOCIATE MEMBERSHIP OF RSAMI, Khadki

7. By submitting this application form and on approval of Associate Membership, I and my dependents and guests shall be bounded by RSAMI Rules and Bye Laws and agrees to comply with notices displayed on RSAMI/Website/Notice Bds/ Instrs given in Monthly News Letters or passed/issued by Secy, RSAMI, Khadki from time to time.

8. I will surrender the membership card of self and dependents on termination of RSAMI Associate Membership. I will also deposit the RSAMI Membership Card of my non entitled dependents as and when they become non-entitled dependents as per RSAMI, Khadki Rules and Bye Laws. Any misuse on this account may please be penalized by levying of fine of Rs 1000/- per occurrence, incl termination of my Membership of RSAMI, Khadki

9. Certificate for un-married/un-employed daughter above 25 yrs of age who is dependent member and is in possession of RSAMI Smart Card :-

“ My daughter : \_\_\_\_\_, age \_\_\_\_\_ years (DOB) \_\_\_\_\_

is un-employed/un-married. I undertake to inform RSAMI, Khadki immediately on change of her above status failing which/on being facts found to be contrary, my membership may be terminated”

10. I shall inform the change of status of self and dependents imdt on occurrence.

11. I understand that only I am authorised to make any representation/complaint with RSAMI, Khadki and shall brief my dependents and guests visiting RSAMI, Khadki accordingly.

12. If there is any lapse/infringement/commission/omission/neglect/ non compliance on any of the above given undertakings by self, my dependents, and guests, the Mgt, RSAMI, Khadki may levy fine to be decided by the Mgt incl termination of my Associate Membership of RSAMI, Khadki without any notice.

Dated : \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

**FOR OFFICE USE ONLY**

1. Regn Fee Paid (Non Refundable) Rs **220/-**-Receipt No & date\_\_\_\_\_.
2. Security Deposit (Non Refundable) Rs\_\_\_\_\_ Receipt No & date\_\_\_\_\_
3. Monthly Subscription @ Rs \_\_\_\_\_ Receipt No & date\_\_\_\_\_
4. Smart Card Charges @ Rs 100 / Card \_\_\_\_\_ Receipt No & Date\_\_\_\_\_
5. Particulars entered in the Membership Register and also data added in the Computer.
6. Total No of \_\_\_\_\_ Associate Membership Cards issued.
7. Card No Issued \_\_\_\_\_.

\_\_\_\_\_  
(Signature of the Dealing Clk)

\_\_\_\_\_  
(Signature of the Secy RSAMI, Khadki)