

KARNATAKA KAYASTHA SAMAJ (KKS)

(REGN. No. DRB4/SOR/310/2018-19 dated 15/03/19)
Registered Office.: No. 203, Kalpak Arcade, Church Street, Bangalore – 560001
Order for approval under section 80G (5) of Income Tax Act 1961 dated 10/03/2022
URN: AAGAK4139DF20214

kksamaj2019@gmail.com, www.kamatakakayasthasamaj.org

MEMBERSHIP FORM

Name of Applicant: *	DoB:	
Residential Address:		
Personal Email ID: *	Mobile: *	
Profession and Hobbies:		
Name of Spouse:	DoB:	
Social Media Link(s), if any:		
Membership Status: Short-Term Member of Highlight the appropriate one.	or Life Member or Renewal: *	
Family Details:		
Name	Relation ship Hobbies	
**Short-Term Membership Fee (STM) (3 years) Rs. 1500/-	**Life Membership Fee (LN Rs. 2500/-	4)
**Mode of Payment: Online/Cheque Proposed By (Life Member 1):	**Seconded By (Life Membe	er 2):
 Membership Criteria: Life Members of Karnataka Kayastha Sabha (KK Kayastha Samaj (KKS) as per the resolution pass members only and Fields marked with * are Kayasthas of any sex with a sound mind and Membership includes dependent parents and cl 	sed. Fields marked with ** are to be filled in mandatory. a minimum of 18 years of age or more are	n by new
I do hereby declare that I do not have any criminal and Regulations governing the KK Samaj (KKS)		ove Rules
Signatures of Applicant:	Date:	
Signatures Secretary/ President	Date:	
Membership Number Allotted:		

(Membership is subject to verification of details and solely at the discretion of the KKS Executive Committee)