



The Old Sherwoodians' Society (Regd.)

Regd. Office: Sherwood College Campus, Ayarpatta, Naini Tal, Uttaranchal - 263001 INDIA Tel. 05942 247140

Facilitation Office: B-14 Competent House, F Block Middle Circle Connaught Place New Delhi - 110001 INDIA

Tel. 011 23326651 Fax. +91 11 23326433 Email. secretary@oldsherwoodians.com Website. www.oldsherwoodians.com

MEMBERSHIP APPLICATION FORM

Type LIFE REGULAR HONORARY
(by invitation only)

Photos

Please attach
2 passport
size photos

Name _____
First Middle Last

Batch _____ Years at Sherwood: From _____ To _____
The year in which the CC was of your batch.

Nick Name / Maiden Name _____

House _____ Roll No. _____

Position _____

Date of Birth _____ Blood Group _____

Residence Address _____

State _____ PIN _____ City _____ Country _____

Telephones _____ Mobile _____

Email _____

Occupation _____

Organization _____ Years there _____

Line of Business _____

Office Address _____

State _____ PIN _____ City _____ Country _____

Tel Extn. _____ Fax _____

Email _____

FEE STRUCTURE

LIFE & REGULAR MEMBERSHIP

Rs.5000 (One-Time)
For a limited period only

Membership Fee Payment Details

Cheque / DD No. _____ Date _____ Amount _____

Bank _____ Branch _____

I have read and understood the Memorandum* and Bye-Laws* of the Society that are in force now or as amended from time to time by the Executive Committee / Genreal Body of the Society. and agree to abide by them.

Date _____

Signature _____

*Please refer to website or contact the Secretary for these documents. Please fill out the Family Information section on the reverse.

FOUNDING COMMITTEE

President

Lt.Gen. S.N. Sharma (Retd.)

PVSM AVSM OS 1942

Vice President

Ranjit Mathur

OS 1948

Secretary

Cdre. Rohit Patel (Retd.) I.N.

VSM OS 1955

Treasurer

Lt.Col.R.P.Singh (Retd.)

OS 1965

Joint Secretary

Vipin Belwal

OS 1987

Members

Shashi Bahadur OS 1967

Getamber Anand OS 1981

Members

Sunder Awatramani OS 1958

Dr.Rajesh Tanwar OS 1965

Members

Pervez Waaris OS 1967

Sunil Issar OS 1983

FAMILY INFORMATION *(Optional)*

Marital Status Single Married Single Again

Spouse Name _____ Blood Group _____
Birthday _____ Anniversary _____
Occupation _____ Organization _____

	Child 's Name	M/F	Date of Birth	Blood Group
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Please indicate if any child has studied at Sherwood and the years spent there.

SAMPLE SIGNATURE FOR THE REGISTER OF MEMBERS

