GUJARAT LAW SOCIETY ALUMNI ASSOCIATION

(GLS ALUMNI ASSOCIATION)

Membership Form

Please affix a recen
passport size
photograph

Note: Kindly provide all the details for the record of the association.

					1
1. Name in full					
Title: Mr./Mrs./Dr.		Surname		Name Father's/Husband's nam	
2 Date of Birth:	3. Phone:				4. Email:
5. Permanent Address:	1	(Office)	(Residence)	(Mobile)	
6. Current Address:					
7 Please indicate which	ah laval/a af ad	ation	hous talian a	. CI C ::	hadia da la
7. Please indicate which	ch levens of ed	ucation you	nave taken a	i GLS insti	aution/school:
	Primary	_Secondary	Gradu	ate	Post-Graduate
8. Name of the Institut	tions of GLS w	here you stu	died and per	iod of study	7:
					yearto
(ii)				From	year to
(iii)				From	yearto
9. Degree/Diploma ob	tained:			10: Class o	obtained:
11. Name of the Institu	ution/School of	GLS where	you wish to	be enrolled	as (alumni) member:
	1 1/:6				
12: Awards/position o (During study	or later)):			
		ession/retire	d?		
4					
14: Current/last design	nation, location	and name o	the organiz	ation of ser	vice/proression:
15. Area of interest (F	Pl tick): Music	Spor s	Drama Tech	inology M	lanagement Law Others
I wish to become mer	mber of the ass	sociation and	d agree to ab	ide by the	rules/bylaws of the association
that may be formed/a	mended from	time to tim	e. I am also	paying the	requisite fees Rs by
cash/cheque no	dated	draw	n on bank		for the membership as
stipulated by the assoc	ciation.				
Signature:		Date:		Lo	cation:
	Member (upto		(100m)		
Membership Fees:	Member (above				Rs. 250/- Rs. 1000/-
	Patron				Rs. 5000/- or more