

VOICE ORGANIZATION (REGD.)

Access to justice and Human Rights for All

Govt Reg: 449/2011-12

Application Form for Voice Organization Membership

To be filled by the applicant

Please read the deed of discharge, release and indemnity and guidelines before filling up the form.

Photograph of
the Candidate
with signature

Personal Information:

Name: _____
(Last Name First Name Middle Name)

Father's/Mother's/Husband's Name: _____

Birth Date: Day Month Year Male Female Blood Group: _____

Address: _____

City: _____ State: _____ Country: _____

Postal Code:

Telephone: Res (with STD code): Mobile:

Office (with STD Code):

E-mail: _____ PAN Card No:

Qualification: _____ Profession: _____

Nationality: _____

Attached Documents' copies:

- Passport/Ration Card/Driver's License/MSEB Bill/ Telephone Bill/Election Card for Address proof
- No Criminal Record Certificate
- Pan Card
- Two Passport size photographs with signature on the back of second photo

Has the candidate previously been the member of the Voice Organization?

Yes No

Is the candidate a member of, or previously been a member of any other non-profit organization?

Yes No

Has the Candidate been involved with any social activities in the past?

Yes No

Preferences of the candidate for the kind of work he/she would like to get involved in Voice Organization:

Deed of Discharge, Release and Indemnity:

- 1) ***The member agrees to abide by the rules of Voice Organization (Regd.) at all times.***
- 2) ***Release and Discharge:***
The member releases, discharges, waives and forever holds Voice Organization harmless from all claims or for any loss sustained by the member whether caused by Voice Organization negligent actor willful act or omission, breach of contract, breach of statutory duty or otherwise in connection with Voice Organization.
- 3) ***Indemnity:***
The member indemnifies Voice Organization against all claims for any loss sustained by the member whether caused by Voice Organization negligent act or willful act or omission, breach of contract, breach of statutory duty or otherwise in connection with Voice Organization.
- 4) ***Warranty as to Age:***
By personally executing this deed, the candidate warrants that he/she is at least of 18 years of age and 15 years for youth cell.
- 5) ***Bar to Action:***
The candidate agrees that this deed may be pleaded as a bar to any action, suit or proceedings taken at any time by the candidate against Voice Organization arising out of or as a consequence of Voice Organization or any incidental activities.
- 6) ***Confidentiality:***
The candidate must keep the terms of this deed strictly confidential and no disclosures of the terms of this deed is to be made by the candidate other than for the purpose of obtaining legal advice.
- 7) ***Definitions:***
In this deed unless inconsistent with the context and subject matters "All Claims" means all Claims, action, suit, demands, damages, interest, and costs arising out of or as a consequence of Voice Organization including any incidental activity. "Any loss" means any loss, damage or injury to person (including candidate) of Property included but not limited to any.
- 8) ***Signatures:***
Signatures executed as a deed.

I _____ wish to become a member of Voice Organization. I understand that the process requires my application to be approved by the board of members of Voice Organization.

"I hereby solemnly and sincerely affirm that the information along with the documents furnished by me in the application form is true and correct. I have not concealed any information. However if any information furnished here in is fraudulent, incorrect or untrue, I understand that I am liable to criminal prosecution and I also agree to forego my membership of Voice Organization. Further that the membership of Voice Organization is liable to be cancelled. I have read the deed of discharge, release and indemnity and agree to abide by it".

Place: _____
Date: _____

Signature of the Candidate

Signature of the Candidate

To be filled by the Witness

Witness Name: _____

Address: _____

Phone:	<input type="text"/>
Profession:	_____

I, Mr./Mrs./Miss ----- Know the applicant personally for a period of year's months and confirm that to the best of my Knowledge, he/she is suitable for the membership.

Place: _____
Date: _____

Signature of the Witness

For office use only (Tehsil/District/State/National Body Office of Voice Organization Or Any Cell Of Voice Organization)

This is to confirm that the information given by the candidate in the application has been checked for validity and that the documents enclosed have been verified. The candidate is found suitable for the membership of Voice Organization.

Signature of the _____ (Designation)
Body-Office at Tehsil/District/State/Nation _____
OR _____ Cell At Tehsil/District/State/Nation _____

Voice Organization (Regd.)

For office use only (National Body Office of Voice Organization)

- The candidate is found eligible for the membership of Voice Organization and is nominated as the _____ at _____ place, _____ country.
OR
 The candidate's application has been rejected.

Place: _____
Date: _____

Mr. Rakesh Kumar Singla
President
Voice Organization

Membership No. Allotted: -----

Guidelines for Filling the Application:

- 1) Fill out the application form correctly and completely. Place an X/√ in appropriate box.
Use only ball pen for signature.
- 2) Two identical copies of passport size recently taken ID photographs with signature on the back of 2nd photo is necessary.
- 3) Name and address should be written in capital letters only.
- 4) Application should be posted to the following address.
Voice Organization, Head Office: Opp. Teshil Office, Lehragaga, Dist. Sangrur 148031 (PB).
- 5) To be effective as a deed, candidate's execution of this document must be signed in the Presence of a witness who must sign in the place provided.
For any enquiries regarding membership issues, e-mail at voiceorganizationlha@yahoo.com or call us **01676-273500, 273600**
For any other information Visit the site www.voiceorganization.org or mobile **09417037443**