

Passport Size
Photograph of
Self in civil dress
(Do not paste)

(FORM TO BE FILLED IN CAPITAL LETTERS)

"Passport Size
Joint Photograph
with spouse in
civil dress
(Please Paste)

AFA Kerala Branch

AIR FORCE ASSOCIATION

(Regn No. S/11186 dated 15 Sep 1980)

Email: afaheadoffice@gmail.com Mob: 7011732270

Membership No : _____

I request for grant of life Membership of the "Air Force Association". I hereby undertake to abide by the constitution and Memorandum of the AF Association. My particulars are as follows.

- (a) Ser No., Rank & Branch/Trade _____
- (b) Name & Initials (Decorations, if any) _____
- (c) Educational/ Professional Qualification _____
- (d) Date of Birth _____
- (e) Date of Commission/Enrolment _____
- (f) Date of Retirement/ Discharge _____
- (g) E-PPO No/ Discharge Order No. (Attach Copy) _____
- (h) Address _____

• Present Correspondence Address	Permanent Residential Address
_____ _____ _____ Dist State:: Pin.....	_____ _____ _____ Dist State : Pin.....

- (i) (i) Email ID _____
- (ii) Mob No _____
- (iii) Name of Spouse with Date of Birth _____
- (iv) Name of Second NOK with Date of Birth _____
- E-mail/ Contact No.(NOK) _____
- (k) AFA Membership Subscription/ Rs. _____
- (l) Subscription through Cheque /NEFT /Cash/ Card: Cheque/DD/UTR No. _____ Dt. _____
 Cheque Drawn in favour of "**AIR FORCE ASSOCIATION**" Drawn on bank _____ Branch, _____
- (m) For Online Payment Our Bank Details Name of the Account Holder **AIR FORCE ASSOCIATION**
 Bank Name **State Bank of India**
 Account No **10244010303**
 IFSC Code **SBIN0070581**
- (n) Any other information _____

Place: _____
Date: _____

Signature _____

LIFE MEMBERSHIP SUBSCRIPTION

A. OFFICERS - Rs 6000/-	B. AIRMEN – Rs 3000/-	C. NCs (E) - Rs 1500/-
D. SPOUSE MEMBERS (If the late veteran was not a member) --- As per the category of the veteran given above at A, B or C.		
E. SPOUSE MEMBERS -No Fee in case the veteran was a member of AFA		

FOR OFFICE USE ONLY

Life Membership/ Total Amount Received Rs. _____ Receipt No. _____ dated _____
 Signature of AFA Staff _____ Signature of Data Feeding Staff _____
SIGNATURE OF APPROVING AUTHORITY