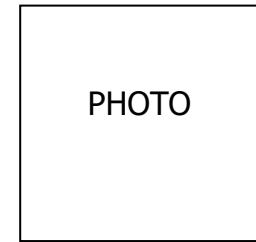


COAST GUARD OFFICERS' MESS ANNEXE, NOIDA

MEMBERSHIP FORM



1. Rank, name & No. : _____
2. Type of Membership
applied for : _____
3. Date of Birth : _____
4. Unit/Directorate : _____
5. Date of Appointment : _____
6. Designation : _____
7. Office Address : _____

8. Residential Address : _____
9. Contact Numbers : (Off.) : _____ (Res.) : _____
Mobile No. : _____
E-mail : _____
10. Any other membership : 1. _____
(if held) 2. _____
11. Family Details
(a) Spouse Name : _____
(b) Children : _____

(Signature of Officer)

Date:

COUNTER SIGNATURE

DIRECTOR