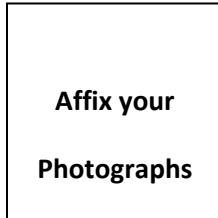


APPLICATION FOR MEMBERSHIP
KARUNA ANIMAL WELFARE ASSOCIATION OF KARNATAKA
(Formerly BSPCA)

The Secretary
KARUNA
Kasturba Road
Bangalore-560 001.

Please enroll me as Member of the Association.



Name: _____
Father/Husband's Name: _____
Date of Birth: _____
Profession: _____
Pets owned: _____
Address: _____

Telephone No: _____

I subscribe to the aims and objectives of the Association, and would like to become a member of the KARUNA Animal Welfare Association of Karnataka. I have read the Bye-Laws and rules of the Association and shall abide by the same.

Please indicate if you are already a member of an organization _____
(If so, please give the details)

(Please tick the sphere of activity you are interested in.)

- | | | | |
|----------------------------|-----|-----------------------------------|-----|
| 1. Humane Education | () | 4. Prevention of Cruelty | () |
| 2. Assistance in Shelter | () | 5. Other Voluntary Work | () |
| 3. Collection of Donations | () | 6. Any other sphere, kindly state | |

Date: _____ Signature of the applicant

Name of the Proposer _____ Signature of the Proposer

Name of the Seconder _____ Signature of the Seconder
(Proposer and Seconder should be the current members of the Association)

Note:

Subscription received by the Association is subject to approval of membership by the Executive Committee.

Membership Fee: Rs.1,500/-