



INDIAN ADVENTURE FOUNDATION

INDIAN ADVENTURE INSTITUTE (YPAHS) COMING SOON

UNDER RUN BY (IAF)

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Creating An Adventurous India
एक साहसिक भारत का निर्माण



Our Motto

WE TRAIN YOUR BRAIN IN THE TERRAIN.....

To,
 National President
 Indian Adventure Foundation

Paste Passport Size Photo with signature in the box
 (3x4.2cm)

PLEASE FILL IN CAPITAL LETTERS

NOTE :- INCOMPLETE FORM WILL BE NOT ACCEPTED

Name Mr. / Mrs. /Ms

Father

Mother

Aadhar No

Date of Birth (DD/MM/YY) __/__/__ Pan card No

Gender: [] Male [] Female [] Blood Group.....

Occupation [] Service [] Business [] Student [] Housewife [] Others []

Membership Type: (Please tick one of the below)

Founder member @Rs.5100/- [] Life Member @Rs.2100/- [] Special Member @Rs.1000/- []

Ordinary Member @Rs.100/[] Students Member @Rs.50/ [] Institutional Member @Rs.500/- []

Affiliated Member @Rs.500/[]

Address 1

Address 2

City Pin code

Mobile

Whatsapp

State

E-mail (Block Letters) I would like to
 Receive notifications through SMS / Email / Whatsapp.

Declaration: I hereby declare that I have not been expelled at Unit/State and National level of the organization. The above given information is true and valid. However, if any defect found, the organization contains full right to cancel my membership. I have read aims & objectives of the association. I undertake to abide by its rules and regulations.

Dated _____

Signature of Applicant



Specimen Signature in the box for Identity card

FOR USE AT NATIONAL OFFICE

Membership subscription, Rs.....for.....received at.....

Dated : Receipt No.Selected/Not Selected

Authority Signature

(Note:- Attached : Aadhar card, 4 passport size photograph, id proof softcopy by e-mail)