DADAR CLUB

Lokmanya Tilak Colony, Lane No. 3, Dadar (East), Mumbai – 400014.

Telephone: 022 24143627 / 24150590 / 24154282. E-Mail: admin@dadarclub.com

Webiste: www.dadarclub.com Facebook Page: www.facebook.com/dadarclubofficial

FOR OFFICE USE ONLY	Submission No.:
Date of Submission:	Submission By:
Received By:	Employee ID:
Self-attested Copies Attached:	Signature:
Data Entry Done By:	Data Entry Done On:
Employee ID:	Signature:
Scan Status:	Verified By:
Employee ID:	Signature:
Membership Start Date:	Membership Valid Till:
Membership Card Valid Till:	
Primary Member:	Dependant Spouse:
Dependent Child – 1:	Dependent Child – 2:
Remarks:	·

Kindly fill this form in CAPITAL. Strike off whichever is not applicable.

Attach self-attested copies of required documents.

PARTICULARS MARKED WITH # ARE TO BE COMPULSORILY SUBMITTED.

Know Your Member Form - Primary Member Details.

1.	Membership Category	:	HONORARY / ORDINARY / NEW ORDINARY / LIFE / DURATIONAL / SPOUSE
2.	Membership Number	:	
3.	Title	:	MR. / MRS. / MISS. / OTHER:
4.	Primary Member		
	First Name	:	
	Middle Name	:	
	Last Name	:	

Version: 01042018 Page 1 of 6



5.	Gender	:	MALE / FEMALE
6.	Father's Full Name	••	
7.	Mother's Full Name	:	
8.	Date of Birth #	:	
	(Attach age proof.)		PAN CARD / AADHAAR / PASSPORT / BIRTH
			CERTIFICATE / SCHOOL LEAVING CERTIFICATE
9.	Nationality	:	INDIAN / OTHER:
10.	Educational	:	UNDER GRADUATE / GRADUATE / POST
	Qualification		GRADUATE / PROFESSIONAL Details:
11.	PAN Card No. #	:	
	(Attach copy.)		
12.	AADHAAR No. #	:	
	(Attach copy.)		
13.	Liquor Permit No.	:	
	(Attach copy.)		
14.	Vehicle Details		
	Registration No.	:	
	Make	:	
	Model	:	
	Owner Name	:	
	Registration No.		
	Make	:	
	Model	:	
	Owner Name	:	
	(Attach RC copy.)#	:	
15.	Marital Status	:	SINGLE / MARRIED / DIVORCEE / WIDOW /
			WIDOWER
16.	Residential Address	:	PASSPORT / AADHAAR / ELECTRICITY BILL /
	Proof #		TELEPHONE BILL / MOBILE BILL / BANK
	(Attach copy. To be in		STATEMENT / OTHER:
	primary member name.)		(Except PASSPORT and AADHAAR, address proof
			should be not more than 3 month old.)

Version: 01042018 Page 2 of 6



17.	Residential Address	:	
	Landmark	:	
	Area	:	
	City	:	
	State	:	
	Country	:	
	Pin	:	
	Telephone	:	
18.	Employment Status	:	SALARIED / SELF EMPLOYED / RETIRED /
			HOME MAKER / STUDENT
	Industry Type	:	
	Entity Name	:	
	Designation	:	
	Entity Address	:	
	Landmark	:	
	Area	:	
	City	:	
	State	:	
	Country	:	
	Pin	:	
	Telephone	:	
19.	GSTIN	:	
20.	Mailing Address	:	RESIDENTIAL / EMPLOYMENT
21.	Contact Details #	:	Mobile Number:
		:	E-Mail Address:
22.	Deceased Primary	:	Name:
	Member Details	:	Membership Number:
			(Applicable for Spouse Membership Category Only)

Version: 01042018 Page 3 of 6



Know Your Member Form – Dependent (Spouse) Details.

2. Spouse First Name Middle Name Last Name	:	
Middle Name Last Name	:	
Last Name	:	
	:	
3. Gender	:	MALE / FEMALE
4. Date of Birth #	:	
(Attach age proo	f.)	PAN CARD / AADHAAR / PASSPORT / BIRTH
		CERTIFICATE / SCHOOL LEAVING CERTIFICATE
5. Nationality	:	INDIAN / OTHER:
6. Educational Qua	lification :	UNDER GRADUATE / GRADUATE / POST
		GRADUATE / PROFESSIONAL Details:
7. PAN Card No. #	:	
(Attach copy.)		
8. AADHAAR No.	# :	
(Attach copy.)		
9. Liquor Permit No). :	
(Attach copy.)		
10. Employment Sta	tus :	SALARIED / SELF EMPLOYED / RETIRED /
		HOME MAKER / STUDENT
Industry Type	:	
Entity Name	:	
Designation	:	
Entity Address	:	
Landmark	:	
Area	:	
City	:	
State	:	
Country	:	
Pin	:	
Telephone	:	

Version: 01042018 Page 4 of 6



11.	GSTIN	:	
12.	Contact Details #	:	Mobile Number:
		:	E-Mail Address:
13.	Anniversary Date #	:	

Know Your Member Form – Dependent (Child) Details

(Dependent Son & Dependent Unmarried Daughter Below 25 Years Age).

1.	Child Title	:	MASTER / MISS. / MR. / OTHER:
2.	Child		
	First Name	:	
	Middle Name	:	
	Last Name	:	
3.	Gender	:	MALE / FEMALE
4.	Date of Birth #	:	
	(Attach age proof.)		PAN CARD / AADHAAR / PASSPORT / BIRTH
			CERTIFICATE / SCHOOL LEAVING CERTIFICATE
5.	Nationality	:	INDIAN / OTHER:
6.	Contact Details #	:	Mobile Number:
		:	E-Mail Address:

Know Your Member Form – Dependent (Child) Details

(Dependent Son & Dependent Unmarried Daughter Below 25 Years Age).

1.	Child Title	:	MASTER / MISS. / MR. / OTHER:
2.	Child		
	First Name	:	
	Middle Name	:	
	Last Name	:	
3.	Gender	:	MALE / FEMALE
4.	Date of Birth #	:	
	(Attach age proof.)		PAN CARD / AADHAAR / PASSPORT / BIRTH
			CERTIFICATE / SCHOOL LEAVING CERTIFICATE
5.	Nationality	:	INDIAN / OTHER:

Version: 01042018 Page 5 of 6



6.	Contact Details #		E-Mail Address:				
PASSPORT SIZE PHOTOGRAPH OF PRIMARY MEMBER		PASSPORT SIZE PHOTOGRAPH OF DEPENDANT (SPOUSE)	PASSPORT SIZE PHOTOGRAPH OF DEPENDANT (CHILD)	PASSPORT SIZE PHOTOGRAPH OF DEPENDANT (CHILD)			
	Signature	Signature	Signature	Signature			
con	nfirmations and ad	consent to Dadar Cluivertisements to me and notions and such other mean	my dependants by way	of SMS, E-mail, post,			
	claration: ereby agree to abid	le by all the rules, regula	tions, terms and condition	ons as specified by the			
tim	e. I understand that will be liable for	Club and framed thereun at I am responsible for all redisciplinary action in conteminside Dadar Club pr	I the actions of my deperate of any inappropriat	endants and my guests			
I h	ereby confirm that	the details mentioned by by me are true and accura	me in this Know Your M				
Sig	nature of Primary	Member					
Na	me:		Membership No.:				
Da	te:		Place:				

Version: 01042018 Page 6 of 6