

## **CWITIAN**

229

## **Association of Alumni of CWIT**

19, Prin. V.K. Joag Path, Pune - 411001.

E - Mail: cwitian@cwit.org

Affix a recent photograph here

Contact Nos.: Treasurer (9421080930), Secretary (9423558189), President (9823073636)

## **MEMBERSHIP FORM**

Name in Capitals						
Mr. / Mrs./ Miss	Surname		Name	Middle / Father's / Husband's name		
Name Before			:			
Marriage, Miss	Surnam	e	Name	Middle / Father's / name		
Birth Date						
	DD / MM / YY		Blood Group			
Qualifications	Year of Passing Diploma from CWIT			Branch	×	
	Year of Passing B. E. from CWIT			Branch		
Permanent Address			7		4.1	
11441000	Tel,: Mobi		10	E Mail :		
	141001		10	E Maii .		
Address for						
Correspondence						
	Tel.:	Mobi	le	E Mail:		
Business or	Employed			Self Employed		
Professional						
Details				27 20		
Remark or						
Suggestion		ii.				
Membership Fee	Membership Type		Membership Fee	Qualification		
	Patron Member		Rs. 50,000 /- or More			
	Donor Member		Rs. 25,000 /- or More	Past S	Student	
	Life Member		Rs. 500 /-			
	Affiliate Life Member		Rs. 1000 /-	Present / Past Teaching Staff		
	Associate Member Student Member		Rs. 300 /-	Fresh Pass out		
)/ 1 1: P :			Rs. 25 per year	Present Bonafid		
Alumni of CWIT". F	ayable preferably Please add Rs. 60	/ by cheque /- for outst	, payable at Pune, drawn ation cheques.	in favour of " CWITI.	AN, Association of	
Signatu	re of Applicant	9				
		Fo	r Office Use Only			
1. Membership Accepte	ed on Date					
2. Membership No.					5"	
3. Amount Paid (cash / cheque) Rs.		chq. no.				
4. Receipt No.				Signature & Name		