



MONALISHA SOCIETY

■ Membership Application Form

Full Name :

Date of Birth

Father's Name:

Present Address :

Phone Number :

E-Mail :

Educational Qualifications:.

Social Activities :

Other Activities:

Paste Your Image here

Date:

Signature of Applicant:

Declaration: I hereby declare that the information provided above is true and correct to the best of my knowledge. understand that any false information may lead to rejection of this application.

Contact Details:

Phone: +91 9854330538 / +91 9864048360

Email: monalishasocietyghy@gmail.com

Address: H-No. 13, Lakshmi Mandir Path, 2 No Mathghoriya, Noonmati, Guwahati, Assam 781020