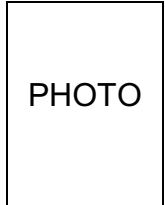




NATUROPATHIC & YOGA ASSOCIATION OF INDIA

Adm. Office:- Campus-Manav Jan Kalyan Shiksha Samiti Alampur road, (Near B.R.C. office) Sootmill, Aligarh, (U.P.), India

Application Form for Membership of N.Y.A.I.



To
The General Secretary,
Naturopathic & Yoga
Association of India (N.Y.A.I.)

Sub:-Application for Membership of N.Y.A.I.

Sir

I beg to apply for the Membership of N.Y.A.I.

I assure to abide with all the rules and regulations, information's & amendment / alternation of the Association, if any during my Membership.

1. Name of Applicant
(IN CAPITAL)
2. Father's/Husband's Name
(IN CAPITAL)
3. Date of Birth.....
4. Permanent Address.....
.....
5. Present Address.....
.....
6. Mo.No.
7. Qualification
8. Others

I do here by declare that the particulars given above are correct to the best of my knowledge.

Place.....

Date.....

Signature of Applicant