



DELHI DEVELOPMENT AUTHORITY

DWARKA SPORTS COMPLEX

SECTOR 11, DWARKA, NEW DELHI-110075

ASSOCIATE MEMBERSHIP APPLICATION FORM

Attach Colored
Passport Size
Photo

FOR OFFICE USE

1. MEMBERSHIP NO. AM 2. DATE OF MEMBERSHIP / /

1. ENTRY FEE RS 4. APPLICATION NO

I wish to apply for Associate Membership of the Sports Complex. The particulars are given below.

5. NAME OF THE APPLICANT (Block Letters)	<input type="text"/>
6. NAME OF THE MEMBER	<input type="text"/>
7. MEMBERSHIP NO	<input type="text"/>
8. RESIDENTIAL ADDRESS	<input type="text"/>
PIN CODE	<input type="text"/>
PHONE	<input type="text"/>
E-mail	<input type="text"/>
9. OFFICE ADDRESS	<input type="text"/>
PIN CODE	<input type="text"/>
PHONE	<input type="text"/>
E-mail	<input type="text"/>
10. OCCUPATION	<input type="text"/> S-SERVICE, B-BUSINESS, P-PROFESSION, O-OTHERS
11. DETAILS OF OCCUPATION DESIGNATION/POSITION	<input type="text"/>
12. DATE OF BIRTH	<input type="text"/> / <input type="text"/> / <input type="text"/>
13. SEX	<input type="text"/> M-MALE, F-FEMALE, O-OTHER
14. MARITAL STATUS	<input type="text"/> M-MARRIED, S-SINGLE, D-DIVORCEE, W-WIDOW/WIDOWER
15. NATIONALITY	<input type="text"/> I-INDIAN, F-FOREIGN
16. EDUCATIONAL QUALIFICATION	<input type="text"/>

17. I enclose here with Demand Draft No.....dated.....drawn onin favour of
“**CAU SPORTS, DDA**” for an amount of Rs (Rupees.....only)
(This is applicable when not paying by Debit / Credit Card)

18. UNDERTAKING

- ❖ All information furnished above are correct. However, my application form is liable to be rejected if details found to be incorrect.
- ❖ I have read the rules and regulations contained in the Brochure and undertake to abide by the same.

FOR OFFICE USE ONLY: -

ACKNOWLEDGEMENT
DELHI DEVELOPMENT AUTHORITY
DWARKA SPORTS COMPLEX, NEW DELHI

Application No.

Received from Mr./Ms./Mrs.....Application for Associate membership of DSC and
an amount of Rs.....(Rupees.....only) in the form of
Demand Draft No.....Dt.....Drawn on.....in favour of “**CAU SPORTS, DDA**” or
pay through **Debit or Credit Card**.

Date.....

(Signature of the Receiving Clerk with Stamp)

Note:

Please attach the following documents with the form:-

1. Request letter from primary member for grant of Associate Membership to his/her dependent member.
2. Two passport size colour photographs.
3. Bank Draft for **Rs.40,500/-** in favour of "**CAU SPORTS, DDA**" on account of non-refundable entry fee including GST or pay through **Credit or Debit Card**.
4. Cheque/Bank Draft in favour of "**CAU SPORTS, DDA**" on account of monthly subscription fee **Rs.3960/-**-including GST preferably for one year.
5. Surrender of dependent membership card.
6. Clearance of payment of monthly subscription from Accounts Branch in respect of member.
7. Proof of date of birth.