



Office Of The

PRESS ASSOCIATION GANDERBAL

Ganderbal, Jammu & Kashmir – 191201

BASIC MEMBERSHIP FORM

Name*: _____

Parentage*: _____

Address*: _____

D.O.B: _____

Academic Qualification: _____

Technical/Professional Qualification: _____

Working Organisation*: _____

Print / Electronic / Digital Media*: _____

Designation*: _____

Ground Experience* (in years): _____

Contact Number*: 1) _____ 2) _____

Email Id*: _____

Photo

Previous Organizations worked for: 1. _____

(if any) 2. _____

3. _____

Declaration: I Mr/Ms.S/D/W/O:

R/O: do hereby declare and affirm that the above details are true and correct to the best of my knowledge and nothing has been concealed.

.....
(Signature with Date)

For Office Use Only

Membership of Mr. / Ms. has been
Accepted under the membership/registration No:
Rejected for the reason:

() - Mandatory fields to be filled*

Document in support to attach:

- 1) Aadhaar Card 2) Authority Letter and Id Card of the Organisation 3) NOC of DM (for portals)