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उत्तरायणा	
UTTARAYANI Learn, Earn & Return	
ONLINE MEMBERSHIP FORM	
(Note – this form will open when online application link above is clicked)	
(ALL FIELDS ARE MANDATORY)	
Name of Applicant	_ Serving/Retired
Details of Service	
a)Central Govt/Uttarakhand Govt/ PSU/PSB/Autonomous Bodies	
b)Cadre (e.g BSF, Police, Army, IAS etc)	
<u>c)</u> Post/Designation(if retired post/designation at the time of retirement)	
Uttarakhand Roots	
a) Ancestral Village	Distt
Contact Details	
Office	<u>Residence</u>
Mobile No	
Land Line No	
Email Id	
Address Line 1	
Address Line 2	
Address Line 3	
Undertaking: I want to voluntarily become a member of Uttarayani Society. I have read the Memorandum of Association of the Society and undertake to abide by the Bye Laws	
and Rules of the Society. I further undertake that I shall do nothing that may harm the interest of the	
Society and I shall not use the forum of Uttarayani for any activity prohibited by the rules/ethics of	

the Uttarayani

Signed - confirmed as read and signed

Full Name _____