DESLC ALUMNI ASSOCIATION

(Registered under the Societies Registration Act, 1860 vide No. MAH / 611 / 10 / Pune)

Registration Form

Form No.

Office Use Membership No.

Instruction : (*) Tick whichever is applicable.

Passport Size Photograph

1) Full Name (Capital Letters)

First Name

Middle Name

Surname

2) Year of Passing

3) Course : BSL LL.B. ☐ LL.B. ☐

4) Date of Birth

Personal Details

5) Permanent Address

6) Address for Communication

7) Telephone : Resi No. Code Number

Mobile :

8) Email ID : _____

Professional Details

9) Practice in Law ☐ Business ☐ Service ☐ Other ☐

Please give details _____

_____

_____

10) Office Address

11) Office Telephone No. Code ☐☐☐☐☐ Number ☐☐☐☐☐☐☐☐

12) Email ID _____

13) Department/s of the college with which you will like to be associated _____

_____

14) Mode of Payment : Cash ☐ Demand Draft ☐ Receipt No. _____

Any further information you will like to give _____

_____

_____

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_____

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_____

Place :

Date :

Signature