

Nomination Form

Certified that I/We have nominated Sri _____

S/o _____.

as a person responsible for the conduct of our organization. He will represent our organization in the event of any legal requirement. In case the designated person leaves the organization, I hereby admit that I will be responsible for any obligations.

Details:

1. Name of the person _____
2. Father's name _____
3. Age _____
4. Designation _____
5. Residential address _____
6. Postal address _____
7. Phone number _____
8. Aadhaar number _____

I hereby accept the above nomination as required,

Signature of Person Nominated

Authorized Signatory