

# 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