



# SWASAM CHARITABLE TRUST

*Beginning of a new vision.....*

Address: No.9/4, Sadayappan Street, Saidapet, Chennai-600 015.

E-mail ID: swasam2serve@gmail.com

Ph.No:+919600072799

## MEMBERSHIP FORM

**Reg No :**

(For office use only)

/SF/

**Name:**

**D.O.B:**

**Age:**

**Gender:** ☐ Male ☐ Female

**Father/Spouse Name:**

**Residential Address:**

**Pin code:**

**Phone No:**

**Mobile No:**

**E-mail ID:**

**Blood group:**

**Willing to donate? :- YES\NO**

**Education Qualification:**

☐

**Annual Member**  
(Rs 500 per year)

☐

**Term Member**  
(Rs 2500 for 5 year)

☐

**Life Member**  
(Rs 5000 for 10 year)

## STATUS

☐

**Self employed**

☐

**Employed**

☐

**Student**

☐

**House wife**

☐

**Retired**

**Name of the Institution/Company:**

**Designation:**

**Date of Joining:**

(For office use only)

Please paste  
your passport  
size photo  
here.....!

**P.T.O**

## Swasam Aims.....

- To pay fees and donate for the study expenses of the poor including for the purchase of text books, uniforms, etc and to meet their hostel and other expenses including higher studies, training or research.
- To award Scholarships, prizes, fellowships, grants and loans and other payments for the purpose of study and research in any and every field of knowledge.
- To donate or pay for the poor and elderly people for their maintenance or donate amount to such organizations, which is running homes for these people.
- To distribute food, books, study materials, medicines, clothing to students, destitute, old aged, orphans, physically challenged persons, mentally challenged students and organizations which are running schools, orphanages etc.
- To acquire or takeover amalgamations or merge with any other trust having same of similar objects.
- To create awareness of general hygiene and to conduct health camps.
- To conduct medical camps for rural/poor people and set up medical centres for treating.

## Few Messages from Swasam.....

- The concept of membership fee is to contribute at least one rupee per day.
- The membership form should be submitted along with two passport size photo (one photo should be pasted in the form and 2<sup>nd</sup> photo for the Membership card).
- Taking photo copies of the membership form is prohibited. It will be issued at the office along with seal.
- The membership card of swasam should not be used for any other purposes.

## DECLARATION

I wish to be one of the pillars of swasam and I will ensure my full support as

- ☐ **Active member**-I can volunteer myself to the service programs.
- ☐ **Passive member**-I can support swasam only through contribution

DATE:

SIGNATURE