



To: The General Secretary

The Canara Bank Retired Officers' Association (Regd.)

4th Floor, Express New City Complex, 13, N. R. Road, Kalasipalya,

Bengaluru-560002. Email: cbroabr@gmail.com, Website: <https://cbroa.co.in>

APPLICATION FOR ENROLLMENT OF ASSOCIATE MEMBERSHIP

Dear Sir,

Please enroll me/my spouse as an **Associate Member** of the **CANARA BANK RETIRED OFFICERS' ASSOCIATION**. I have read the Rules and Byelaws of the Association and undertake to abide by the same.

I am remitting **Rs.1000.00** to the credit of **CBROA's account No. 0408111100140** with Canara Bank, Jayanagar Shopping Complex Branch, Bengaluru. (**IFSC Code – CNRB0000408**).

| | |
|----------------------------|--|
| Details/Date of Remittance | |
|----------------------------|--|

I hereby furnish the following details:

| NAME OF THE ASSOCIATE MEMBER [IN CAPITALS] | Date of Birth | | | | | | | |
|--|---------------|---|---|---|---|---|---|---|
| Shri/Smt. | d | d | m | m | y | y | y | y |

Type of Associate Member: **Spouse of the existing member** ☐ **Family Pensioner** ☐

| NAME OF THE SPOUSE (EXISTING MEMBER) [IN CAPITALS] | STAFF NO |
|--|----------|
| | |

| FULL ADDRESS (IN CAPITALS) | | | | | | | |
|-------------------------------|----------|--|--|--|--|--|--|
| | PIN CODE | | | | | | |

| PENSION A/C NO. (IN CASE OF FAMILY PENSIONERS) | BRANCH NAME |
|--|-------------|
| | |

| MOBILE NO | E-MAIL ID (IN CAPITALS) |
|-----------|-------------------------|
| | |

I hereby agree to keep you informed of any change in address/email id/mobile number etc. and agree to receive information from CBROA by Email and SMS/Whatsapp by bulk messaging system.

Place:

Date:

Signature of the applicant/Primary Member

For office Use:

| Received on | Admitted on | Receipt No. | Membership No. |
|-------------|-------------|-------------|----------------|
| | | | |

Treasurer

General Secretary