

# SHRI RAM CHANDRA MISSION

80th Birth Anniversary Celebrations of our Beloved Master | 22nd to 25th July, 2007 | Volunteer Form (Hard Copy Version)



Country		Centre		Date	
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S. No.	ID Card No.	Full Name	Date of Joining SRCM (mm/yy)	Mobile No.	Email ID	Age	Prefect	Sex (M/F)	Arrival and Departure Dates	Languages	Profession & Qualifications	Preferred Volunteer Work
1.							<input type="checkbox"/>					
2.							<input type="checkbox"/>					
3.							<input type="checkbox"/>					
4.							<input type="checkbox"/>					
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14.							<input type="checkbox"/>					
15.							<input type="checkbox"/>					
16.							<input type="checkbox"/>					
17.							<input type="checkbox"/>					
18.							<input type="checkbox"/>					

Name of CIC / ZIC / RIC		Signature		Data Entered By	
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**INSTRUCTIONS FOR COMPLETING THIS FORM:** Fill in English using BLOCK letters | This form may have the names of all volunteers from your centre | This form is to be printed completed, signed and sent to Celebrations Committee, Shri Ram Chandra Mission, 736, P N Road, Tiruppur – 641 602, Tamilnadu. Ph: +91 421 2480068/69