



# ANGELITE ALUMNI

Holy Angels' Convent School,  
MUZAFFARNAGAR

## MEMBERSHIP CUM DIRECTORY FORM

1. Name .....
2. Date of Birth .....
3. Permanent Address .....
4. Present Address .....
5. Phone Nos. Residence ..... Office .....
- Mobile .....
- E-mail .....
6. Marital Status .....
7. Occupation ..... 8. Designation .....
9. Organization .....
10. Tenure in School From (Year) ..... to .....
11. Batch of (year) ..... (Please write the year of Passing out of School i.e. the year in which you had given the board exam of standard 12th or would have given the board exam of standard 12th had you continued your studies in Holy Angels' Convent School.)

Please enclose remittance for Membership Registration as follows :

Life time membership Rs. 2000/-  
DD/Cheque in favour of 'ANGELITE ALUMNI', payable at Muzaffarnagar.

FOR DIRECT REMITTANCE BANK DETAILS ARE :- A/C NO - 058001000013449

All correspondence to be addressed to camp office :  
Angelite Alumni, Kamal Theatre Building,  
Muzaffarnagar-251001, U.P.

Email address : [anil@sukamindustries.com](mailto:anil@sukamindustries.com)

INDIAN OVERSEAS BANK  
MUZAFFARNAGAR