



SECURITIES & TIMESHARE OWNERS' WELFARE ASSOCIATION

13, First Floor, Mookambika Complex, #7(Old #4) Lady Desika Road, Mylapore, Chennai 600004

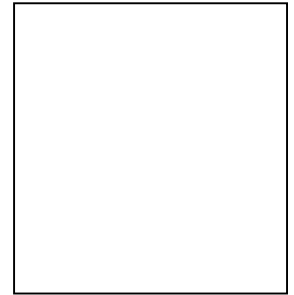
Ph# 24982285 | Email: unitedstowa@gmail.com

MEMBERSHIP APPLICATION FORM

Life Member Ship Fees:

- ☐ Rs.1,250/- for each individual
☐ Rs.2,500/- for each Firm / Company / Association

I/We wish to join the above association. I/We give below the particulars of membership:



Name:	Joint Name:
	Relationship with First Name:
PAN No:	PAN No:
ADHAAR No:	ADHAAR No:
Age:	Age:
Date of Birth:	Date of Birth:
Qualification:	Qualification:
Resi. Address:	Resi. Address:
Occupation:	Occupation:
Off Address:	Off Address:
Designation:	Designation:
Phone:	Phone:
Mobile:	Mobile:
Personal Email:	Official Email:
FOR OFFICE USE	
Application Received on	
Membership No	
Placed & approved at EC Meeting held on	
Member Intimated on	
Gen. Secretary	President/Vice President



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<input type="checkbox"/> SCHEDULE A :	TIMESHARE-I	TIMESHARE-II	TIMESHARE-III	TIMESHARE-IV
Customer No:				
Week No./Dates				
Apartment Type (Note 7)				
Resort Name (Note 8)				
Resort Location				
Dt. Of 1 st inst./full payment				
Dt.of Agreement/Cover Letter				
If Shareholder Folio No.				
No.of Shares Folio-wise				
Have RCI affiliation	from :	To:		
Have you taken RCI Holidays Abroad in India give details:				
<input type="checkbox"/> SCHEDULE B : EQUITY	<input type="checkbox"/> SCHEDULE F : REAL ESTATE			
<input type="checkbox"/> SCHEDULE C : MUTUAL FUNDS	<input type="checkbox"/> SCHEDULE G : COMMODITIES			
<input type="checkbox"/> SCHEDULE D : FIXED INCOME INVESTMENTS	<input type="checkbox"/> SCHEDULE H : FOREX			
<input type="checkbox"/> SCHEDULE E : INSURANCE	<input type="checkbox"/> SCHEDULE I : BULLION			
CHECKLIST ATTACHMENTS WITH APPLICATION FORM				
<input type="checkbox"/> Copy of PAN card Self Attested				
<input type="checkbox"/> Address proof – Self attested copy of passport/Driving Licence/Aadhaar Card/Bank Statement/Bank Passbook				
<input type="checkbox"/> Timeshare details				
<input type="checkbox"/> Cheque favouring STOWA				
I/We confirm and agree that;				
1. None of the office bearers of the Association have promised me any benefits to induce me to join the Association				
2. Abide by the constitution(Bye-Laws), Rules and Regulations of the Association				
3. Enclose the life membership fees and agree to provide relevant document copy/copies as required				
Yours faithfully,				
Date :				
Place :				
First Name				
Joint Name				