Form No: 2013/	
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Title

First Name

_____ Batch

ASSOCIATION OF LA MARTINIERE ALUMNI

3A/1, 3rd Floor, Hastings Chambers 7C, Kiran Sankar Roy Road Kolkata-700001, India

Phone: 91-33-2242 6439/6440/6441 email: support@almamater.in Internet: www.almamater.in

Name

House

Date of Birth



Last Name

LIFE MEMBERSHIP FORM

(To be filled in Block Letters)

Middle Name

_____ Year of Passing _____

School	LMB / LMG	I	Blood Group	
Marital Status	Married /Single	1	Marriage Date	
Spouse Name		!	No. of Children	
PROFESSIONAL	. DETAILS			
Occupation				
Designation				
Name of Org	ganisation			
Office Addre	ess			
Phone No (With STD Cod		_ Fax		Email
COMMUNICATIO	ON DETAILS			
Address				
City			_ State _	
Pin/Zip			_ Country ₋	
Phone No	1-)		_ Mobile _	
(With STD Code email 1			_ email 2	
for students pas:		ars and Rs 500		Alumni'. Amount payable - Rs 4500/- est. Rs 2000/- of the membership amount
				office - 3B Camac Street, 2nd floor, eries, please contact : 9051054545.
Cheque / DD/ No	Da	ate	Bank	
Signature			_ Date _	