



भारतीय प्राथमिक चिकित्सा परिषद
FIRST AID COUNCIL OF INDIA
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भारतीय प्राथमिक चिकित्सा परिषद FIRST AID COUNCIL OF INDIA

Government Recognised / Approved Organisation Established Under Section 8
Ministry of Corporate Affairs Govt. of India

PASTE HERE

DO NOT ATTEST

Signature

MEMBERSHIP FORM

Government Recognised/ Approved Organisation Established Under Section 8 Ministry
of Corporate Affairs Govt. of India

Write in Hindi or English (CAPITAL). Use only Blue/Black Ball Point Pen Write one letter in one Box.
Do not write outside the Boxes. Do not use Photocopy of this form Use Numericals only.

Identity Number

1. Organization Name in CAPITAL Letters / Self

2. Authorised Person Name in CAPITAL Letters / Candidate Name

3. Nationality

4a. Postal Address in CAPITAL Letters

Address

District

State

Pin Code

4b. Permanent Address

Mobile No.

Address

District

State

Pin Code

5. Date of Birth

Date

Month

Year

6(a). Male

6(b). Female

6(c). Others

7. Disability

8. Disadvantaged Group

9. Position in Organization

10. E-mail

11. Phone No.

12. Activity

12. Specialization

DOCUMENTS REQUIRED

Passport Detail / ID / Aadhar

Location Proof

Passport Size Colour Photograph

Previous Membership

List of License

Signature

Date.....

FOR OFFICE USE ONLY

Dated :

Full Signatures with seal