## Enrollment Form for CBOA & CBOA Benevolent Fund

The General Secretary THE CANARA BANK OFFICERS' ASSOCIATION (Regd) Central Office: 402-406, 'Himalaya House', 4<sup>th</sup> Floor, 79, Mata Ramabai Ambedkar Marg, P.B.262, Mumbai - 400 001.



#### Dear General Secretary,

Please enroll me as a member of the CANARA BANK OFFICERS' ASSOCIATION & CBOA BENEVOLENT FUND. I have read the Rules and Byelaws of the Association and undertake to abide by the same. I am enclosing herewith a cheque /draft for Rs.10/- (Rupees ten only) towards entrance fee.

I have given a mandate for deduction of **Rs150/-** (Rupees one hundred fifty only) towards monthly Subscription to CBOA and Rs.**250/-** (Rupees Two hundred fifty only) towards monthly contribution towards CBOA Benevolent Fund from the monthly salary and allowances under check off facility and the same is lodged with Branch/Office & is effective from\_\_\_\_\_

NAME [IN CAPITALS]	
NAME OF FATHER/HUSBAND	

Ge	nder		Ca	tegory		Blood Gr.	Date of Birth	Ed. Qualif.	Native State
Μ	F	SC	ST	OBC	GEN				

Staff No.	Designation	Date of Joining	Branch/Office

Mobile No.	e-mail ID

Permanent Address	Address for Communication

### CBOA - BENEVOLENT FUND: Nomination Form

I \_\_\_\_\_\_Son /Daughter/Wife of \_\_\_\_\_\_ hereby nominate following person to my membership to the "CBOA - Benevolent Fund".

1.	Name of the Nominee and relationship with the member.	
2.	Date of Birth of Nominee and Name of the Guardian (in case of Minor)	
3.	Address of the Nominee (If it is other than the permanent address)	

Place: Date:

Date

Signature

For office Use:

Received on	Admitted on	Receipt No.	Membership No.	Nomination Registration

General Secretary /Treasurer

# Mandate Form (CBOA Copy) From: To: The Branch Manager/Section in charge Canara Bank Staff No. Designation: Canara Bank Region/Circle:

Dear Sir,

Sub: Authorisation for deduction of subscription to Canara Bank Officers' Association and contribution towards "CBOA Benevolent Fund" from the monthly salary and allowances under check off facility.

I request you to deduct a sum of Rs.150/- (Rupees one hundred fifty only) being the monthly subscription to the Canara Bank Officers' Association and Rs.250/- (Rupees Two hundred fifty only) being the monthly contribution towards CBOA-Benevolent Fund from the salary and allowances payable to me every month and remit the same to CBOA account by way of check off facility.

This authorisation shall continue to be effective till I revoke the same and such revocation shall be effective from the first month of the following calendar quarter. Please note that my earlier mandates if any stand withdrawn with immediate effect.

Place:	Space for ack. by the Bank	
Date:		Signature of the member
	Branch seal/Date/Signature	
	cut here	

# Mandate Form (Bank Copy)

From:		To: The Branch Manager/Section in charge Canara Bank	
Staff No.	Designation:		
Canara Bank		Region/Circle:	

Dear Sir,

# Sub: Authorisation for deduction of subscription to Canara Bank Officers' Association and contribution towards "CBOA Benevolent Fund" from the monthly salary and allowances under check off facility.

I request you to deduct a sum of Rs.150/- (Rupees one hundred fifty only) being the monthly subscription to the **Canara Bank Officers' Association** and Rs.250/- (Rupees Two hundred fifty only) being the monthly contribution towards **CBOA-Benevolent Fund** from the salary and allowances payable to me every month and remit the same to CBOA account by way of check off facility.

This authorisation shall continue to be effective till I revoke the same and such revocation shall be effective from the first month of the following calendar quarter. Please note that my earlier mandates if any stand withdrawn with immediate effect.

Place: Date:

Signature of the Member