



འཇམ་མཁར་ཕན་བདེ་ཚོགས་པ།  
Jamkhar Phendey Tshogpa  
“Service to Community”

8.2 **JPT Registration Form**

**A. Membership Details**

Particulars	Member	Spouse
Name		
Phone/fax		
E-mail		
Sex		
Birth date		
Citizenship ID		
Permanent Address		
Bank account No. for SEMSO		
Current Address		
Nominee (s) for welfare claim		

**B. Children**

Sl. No.	Name	CID	DoB	Gender
1				
2				
3				
4				
5				
6				

**C. Member's Parents**

	Name	CID	Residence
Father			
Mother			



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**D. Spouse’s Parents**

	Name	CID	Residence
Father			
Mother			

I certify that the information given above is true to the best of my knowledge. In the event of the demise, benefits will be claimed in aligned with the JPT’s AOA drafted -2013.

I take an oath of complying the JPT’s management decision at all times. Failing to abide shall be punishable and lead to the termination of my membership.

Signature  
 Date: .....

**For use by Managing Committee only**

Membership into the JPT: Accepted  Not Accepted

\*Not accepted since the applicant fails because of the Clause.....of the JPT Article of Association

Verified by:

Approved By:

**(SECRETARY)**

**(CHAIRMAN)**