BENGAL HOMOEOPATHIC CHEMISTS AND DRUGGISTS ASSOCIATION Reg. No. : S/IL/59542 Gorkhara Road, Sonarpur, Kolkata - 700 150, W.B., India Contact: 9433688901, 7001893538, 9038778971 e-mail: bhcda2009@gmail.com	
Application for new membership	
DISTRICT	Zone. Code
Dist. Code	Application Date:
Member Type:	Drug License No.
Last Renewal Date	Type of Business.
Shop Name *	Shop Address *
Ward no	Locality
Pin Code:	Since Date
G.S.T or PAN No.	Mobile No. *
WhatsApp No. *	

Proprietor 1 Name *

Resi Address.

Email Id

Blood Group *

Police Station.

Proprietor 2 Name

Email Id

Resi Address.

Police Station.

Competent person Name

Resi Address.

Mobile No

Proprietor 1 Image

Proprietor 2 Image





Proprietor 1 Signature

Proprietor 2 Signature

Competent Signature

То

The General Secretary

Bengal Homoeopathic Chemists and Druggists Association

Dear Sir, I/We hereby apply for the membership of the association, we remit herewith the sum of rupees five hundred only as per memo below which please receive and approve our name as a member of association.

I/We hereby agree to abide by all resolutions that may be passed by the Association or its central committees from time to and regulations, including the arbitration agreement.

I/We further declare that we shall not during the continuance of this membership, indulge in any activity or do any act, contrary to the objects laid in the Memorandum and Articles of Association, or contrary to the purpose for which the organisation is working or Join or accept membership of any other organization, whose objects are contrary to the object of the Association. We are enclosing xerox copies of our drug licences.

I/We have gone through the Memorandum & Articles of the Association.

I/We further declare that we shall remain liable for all such acts and deeds perjudicial to the interest of the Association & the general members committed by the persons representing the firm.

□ I agree to the terms and conditions