



STATE BANK OF MYSORE PENSIONERS' COMMUNE (R)

Ground Floor, BKG Complex, State Bank of India,
Mysore Bank Circle Branch premises, Mysore Bank Circle,
644/645, Avenue Road, Bangalore 560009.

Joint Photograph or separate
photographs of member and
his/her spouse

APPLICATION FOR MEMBERSHIP – ASSOCIATE MEMBER

Membership No.

Associate Membership No.:

Name of the Member/Pensioner							
Details of the Spouse							
Name of the Spouse							
Sex : Male/Female		Date of Birth					
Whether she/he was an Employee of State Bank of Mysore		Yes/No	If yes, HRMS No. of Spouse				
If yes, whether he/she is still in service or retired		Retired/in Service					
If still in service, Designation							
Date of retirement, if retired							
Address							
Mobile Phone No. of Spouse							
Email ID of Spouse							

Kindly enroll me/my Spouse as an Associate Member of the State Bank of Mysore Pensioners' Commune. I have read the rules & regulations of the organisation and I he/she is have informed him/her in full and both of us hereby agree to abide by the same. Enclosed a Demand Draft/Cheque No./Debit authorization for Rs.500/- (Rupees five hundred only) , being the Associate Membership fees favouring State Bank of Mysore Pensioners' Commune on State Bank of India/ with Branch & my/our account number is _____

Date

Place

Signature of Member/Spouse

Note: Associate Membership is applicable only to the spouse who was not an employee of State Bank of Mysore. If both of them were employees of State Bank of Mysore, then both of them are required to become members to enable the Commune to represent both of them.

