APPLICATION FOR TENURE MEMBERSHIP 1/3/5 YEARS AT CWGVSC

Name	:	
Father's/Husband's Name	:	
Date of Birth	:	
Present Address with Phone No.	:	
Permanent Address with Phone No.	:	
Office Address with Phone No.	:	
e-mail	:	
Occupation	:	
Existing Membership Card No.	:	
Membership Required	:	1 Year 3 Years 5 Years
No. of Dependants	:	
Photocopy of ID Proof	:	Adhaar DL EPIC Passport Other
Photocopy of Local Residance Proof	:	Adhaar DL EPIC Passport Other
	(FOR OFF	(SIGNATURE OF APPLICATION)
Recommended / Not recommended.		,

Secretary CWGVSC Delhi Development Authority

FOR	OFF	ICF I	ISF	ONLY

No.....

SEVELOPMENT AUTHOR
विकास प्रतिष

Membership No : _____

Date Of Membership

Membership Valid up to : ______

DELHI DEVELOPMENT AUTHORITY COMMONWEALTH GAMES VILLAGE SPORTS COMPLEX

APPLICATION FORM FOR **GRANT OF TENURE MEMBERSHIP OF 1/3/5 YEARS For Indian Citizen's Only** PHOTO (Self) 1. NAME (Block Letters) 2. Father's Name 3. **Residential Address** (Attach Proof of Address) 4. Academic qualification **Details of Occupation** 5. (Designation/Position) Office Address 6. 7. Date of Birth I-Indian 8. Nationality F-Foreigner 9. Gender Female **Any Other Category** Male 10. **Marital Status** M-Married, S-Single, D-Divorcee, W-Widow/ Widower 11. Telephone No. Residence______ Office______ Mobile Fax 12. **Email ID** 13. Spouse Details (If they wish to utilize the Complex) Spouse Name _____

Date Of Birth Marriage Date

14. <u>Dependent</u> <u>Rela</u>	<u>tionship</u>	<u>Name</u>		Date of Birth Attach Valid Proof
(a)				
(b)				
(c)				
(d)				
Photos of Depender	<u>nts</u>			
РНОТО	РНОТО	РНОТО	РНОТО	РНОТО
(Spouse)	(Dependant1)	(Dependant2)	(Dependant3)	(Dependant4)
Name	Name	Name	Name	Name
15. I wish to apply (Tick only one)	for Tenure Membersh)	nip 1year	3years 5	years
NOTE:	6- 44 (44			
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- (i) Eligibility:- Residents of Delhi / NCR completing the age of 21 years, are eligible for membership at CWGVSC.
- (ii) Families Details :- Children between age 05 to 21 years and Spouse can be dependent members, children above Two Years age may be provided in members detail for use of various facilities such as Toddlers Pool, Children are a subject to availability of space.
- (iii) Self attested Photocopy of Photo ID & Local Residence Proof of member (EPIC, DL, Aadhar, Passport, Pan Card) and photocopy of Birth certificate incase of children and marriage certificate incase of spouse, subject to date of birth in (DD/MM/YYYY) Format.
- (iv) Three passport size similar photographs of each person / dependent seeking membership.
- (v) Timing of submission of form on all working days Except National Holidays- 10:00 AM to 04.00PM (except lunch hrs. 01:00 PM to 02:00 PM.)
- (vi) Demand draft drawn on any bank payable at New Delhi in favour of "CAUSPORTSDDA".
- (vii) Online payment through Debit Card/ Credit Card/RTGS/ IMPS etc. is acceptable.
- (viii) Rs. 50 + GST per head will be charged for membership card.
- (ix) Membership will be activated next day for counter booking & after 15 days for online booking.
- (x) Outdoor Badminton & Jogging Track available free of cost for members.
- (xi) Date of membership commencement means w.e.f. 01st of each month on submission of form upto 25th of the month. In case any individual submits the membership form on or after 26th of the current month then the membership will be effective from 01st of the following month.
- (xii) Once membership allotted will not be cancelled in any situation.
- (xiii) Particular facility may be closed for specific period for members in the interest of complex/ compliance of Govt. Orders.
- (xiv) Timing:-06.00 AM to 09.00 PM Summer & 06.30 AM to 08.30 PM Winter. Wednesday Closed.
- (xv) Allotment of membership does not confirm/ entitle the member to desired slot for swimming pool for which separate pass has to be made as per availability of vacancy.
- (xvi) All receipts of payment will be valid for calendar month only.
- (xvii) Private Coaching is not permitted. Playing badminton with more than one Shuttle cock is not permitted.

Certificate:

The information furnished above is correct to the best of my knowledge and I understand and undertake that in future any particulars are found to be wrong or factually incorrect then my membership may be cancelled and the charges forfeited.

(Signature of applicant)

			Date	
2. FileNo	F-3(289)/CWGV	SC/DDA Type of Te	nure Membership 1	3 5
3. Payment	made by DD/Pay	/ Order No	dated	
4. Drawn o	n		Bank) for	(Amount)
5. Payment	will be received	by Card/ UPI and Dema	nd Draft:- (For Indian Cit	izens Only).
Sr. No.	Period	Basic Rate	*GST @ 18%	Total Amoun
1	01 Year	Rs. 8576.27/-	1543.73/-	10120/-
2	03 Years	Rs. 20593.22/-	3706.78/-	24300/-
		D- 24222 02/	6177.97/-	40500/-
	05 Years tes are subject to	Rs. 34322.03/- change from time to ti ia time to time.	me by the DDA.	the Receiving Cle
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Date_____

FOR OFFICE USE ONLY

No.....

With stamp