



Lok chetna parishad

Registered under Rigistra of societies, society registration act of XXI of 1860 Govt. of NCT

Center Association Form

Center Name: _____ Introducer _____

Owner's Name: _____

Partner's Name: 1. _____ 2. _____

Center's Address: _____

_____ Pin Code _____

Type of center : Owned Rented Leased Contract

Date of starting: Working Hours: -

Center's phone: _____ Altrenet No.- _____

E-mail: _____ Alternate Mail _____

Courses in Center: _____

No's of Classrooms: _____ Seating Capacity _____

Facilities Available: Course Lab Library Drinking Water First Aid Kit Fire Fighter

Declaration: I _____ s/o _____

Designation:

Declared that above given details are true & correct and nothing is hiding or fabricated. I am responsible for any false or incorrect information.

Note: Any false or incorrect information is subject to rejection of proposal/application & no any fee will return.

LOK CHETNA PARISHAD

Date:

Place:

Center's Seal / Auto. Signature