

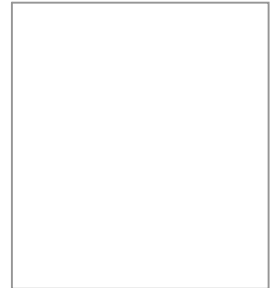


**DIVYA CHAYA TRUST**

CHIRANJIV KARAM BHOOMI, C -1. PALAM VIHAR, GURGAON  
SENIOR CITIZENS HOME & DAY CARE CENTRE

**REGISTRATION FORM FOR ADMISSION**

1. Name in Capital Letters .....
2. Date of Birth /Age .....
3. Permanent Address .....
4. Education Qualification .....
5. Single /Married /Widow/ Separated! Divorced .....
6. Name (s) of Son(s) /Daughter(s) nearest relative to be contracted in case of emergency  
Name .....
- Address .....
- Telephone Nos. ....
7. Name (s) of Son(s)/Daughter(s)/ nearest relative along with addresses & telephone nos. who can be contacted incase of emergency .....
8. Experience and Hobbies .....
9. Health conditions including Blood Group .....
- i. Any Serious illness (Yes or No) .....
- ii. Any infectious disease (Yes or No) if yes , specify .....
- iii. Are you ready to devote the time for the Home (Yes or No) .....
10. Financial Status .....
11. Financial Support .....
12. Recommended by .....
- Name (s) (1) .....
- (2) .....
- Address (1) .....
- (2) .....



I have read and understood the rules and regulations of the Home and undertake to abide by them.  
I also certify that on admission I will have no claim of ownership rights or interest over the property of Home.

I further certify that none of my heir or legal representative or any person claiming through or under me shall have any right on the security deposit, which shall become the sole property of the society in the event of my death.

Date .....

Signature of applicant

Signature of Witness

13. Your Reason (s) for joining the Home .....

14. Have you applied for admission to any other similar home earlier if so, the result thereof .....

Signature of Applicant  
Date.....



**CERTIFICATION**

I ..... S/O or D/O .....  
R/O ..... do hereby certify that I have read and  
understood the rules and regulations of the Home and undertake to abide by them.

I also certify that on admission I will have no claims of ownership rights or interest over the property of Home.

I further certify that none of my heir or legal representatives or any person claiming through or under me shall have any right on the security deposit, which shall become the sole property of the society in the event of my death.

Date: .....

.....  
Signature of applicant

.....  
Signature of Witness