



S. No:

DEFENCE SERVICES OFFICERS' INSTITUTE
'H' BLOCK, PALAM VIHAR, GURGAON-122017
(TELE NO: 0124-2365228, 4554700)

Membership No allotted _____ (For office use only)

**Application for DSOI Membership: Serving/Retired Officers/
Honorary Members**

(Please use Block letters and Black Ink only)

1. Type of Membership _____ PERMANENT _____
2. Whether Serving/ Retired: _____ Type of Commission _____
3. No _____ Rank _____ Name _____
4. Identity Card No _____ issued by _____
5. Date of Birth _____
6. Date of Commission _____
7. Service (Army /Navy /Air Force (Regt/Corps in case of Army) _____
8. If EC/SS/Prematurely retired, state present employment/profession _____
_____ (Attach relevant documents, if any)
9. Full Address of Unit/Formation/Tele No _____

10. Present Residential Address/ _____
_____ Pin Code _____ Tele No _____
Mob No _____
11. Permanent Home Address _____
_____ Pin Code _____ Tele No _____
Mob No _____ Alternate Mobile Number _____
12. E- Mail I.D.: _____
13. Banker's Name & Acct No _____
14. PAN No _____
15. Single / Married (if married give, details of family as under: -
Spouse _____ R/O _____ Date of Birth _____
Children: Fill dependent's Form attached (if applicable/required)
16. DSOWF Membership Card No _____
(Attach photocopy of card). If not held, a local Cheque of Rs 500/- in favor of DSOWF.
17. Date of posting to Delhi/Gurgaon and Reference No. of posting order (Please attach photocopy)

18. Pension Payment Order No (in case of retd offr) _____ (Att photocopy of PPO)
19. DD/Local Cheque No _____ in favor of DSOI Gurgaon, for Rs.10, 000/- as membership fee is enclosed.

DECLARATION

1. I undertake to become a permanent member of the Defence Services Officers' Institute, Gurgaon. I have read the Rules and Bye Laws of the Institute and agree to abide by the same.
2. I undertake to intimate any change of Office/Residential address and Tele Nos to DSOI, immediately on posting/transfer/shifting to a new location.
3. I hereby certify that I will clear all my dues/subscription on due date in the event of non clearance of the dues in time, action to terminate my membership may be taken as per rules in force.
4. Honorary/Civilian members have no voting rights.
5. DSOWF card can be obtained from QMG Branch (R. No.341), 'A' Wing, Sena Bhawan, New Delhi-11.
6. Dispute of any nature pertaining to the functioning of DSOI will be under sole jurisdiction of Management Committee and the decision of the President will be final and binding on me.
7. Offrs who are voluntarily apply for cancellation / termination of their membership before completion of one year from the date of allotment of membership, their security deposit of min 50% be lapsed.
8. I will be issued with a Membership Card with 10 years validity date of issue. The same will be renewal by DSOI on Expiry.
9. I am aware that I cannot claim any compensation/relief from DSOI in the event of any mishap occurring while availing catering or sports/Gym facilities.

Date: _____

Signature of applicant _____

CERTIFICATE

Certified that the officer will clear all his dues and obtain clearance certificate from the Institute before leaving the Unit /Station on posting/retirement/station

Recommended / Not Recommended

Office Stamp

Station: _____

Sig of **Officer Commanding**

Sig of

Date: _____

(for Serving officers)

Zila Sainik Board

(For Retd officers)

Please paste recent Photograph at respective box and signature at appropriate place

Member

Member Colour Photo

Spouse Colour Photo

Spouse

Member Name with Title _____

Spouse Name with Title _____

(Member's signature)

(Spouse signature)

NOTE

1. Membership fee amounting to Rs.10, 000/- in favour of DSOI, Gurgaon through DD/local cheque payable at the time of deposition of Application form of membership is required.
2. Issue of membership card and additional dependent card(s) is payable @ Rs.220/- per card through cheque favoring of DSOI, Gurgaon.
3. Membership subscription @ Rs.400/-pm is payable in advance on yearly basis.
4. Age criteria for Dependent membership.
 - (a) Son(s) Unmarried & unemployed below the age of 25 yrs (A photocopy of school board Certificate/Pass Port/Voter's ID)
 - (b) Daughter(s). Unmarried & Wholly dependent on member.

Date: _____

(Signature of member)