



Application for Life Membership

(Please read the information overleaf. Tick whichever is applicable and strike off where not applicable. Fill all columns)

To
The State Secretary
Indian Red Cross Society,
A.P.State Branch,
10-5-1, Red Cross TCRV Training Institute,
Hyderabad-500028. A.P.
Tel.No.040 23221749, Telefax.23333112

Sir/Madam,

I request you to enroll me as Patron/Vice Patron/Life Member Life Associate/Institutional Member/Annual Member of Indian Red Cross Society, I am enclosing /paying Rs. _____ through Cash or Cheque/DD.No _____ Dt. _____ payable at bank _____.

I am enclosing two copies of pass port size photographs. Following are my particulars.

Full Name : _____
Father /Husbands Name : _____
House No. : _____, St.No./Area : _____
Locality : _____, Town : _____
District : _____, Pin code : _____
Tel.Nos. (STD Code) : _____ (Residence /Others) _____
Fax No : _____, E-mail : _____
Date of Birth : _____, Age : _____
Blood Group : _____, Occupation: _____
Educational Qualification : _____

I am interested and wish to work as a volunteer and associate myself in the following activities of Red Cross (Please see the list of activities overleaf and write the code no, and activity you are interested.

Code No. _____ Activity _____ Code No. _____ Activity _____
Code No. _____ Activity _____ Code No. _____ Activity _____

I can spare _____ hours a week (approximately) for Red Cross activities. I shall be a disciplined member and shall abide by rules and regulations of IRCS and I am willing to undergoing training if required.

Date: _____ Signature _____

INFORMATION ABOUT RED CROSS

Inspired by the narration of experience of war of Solferino by Henry Dunant the Red Cross Organization was formed in the year 1864. The first Geneva Convention has adopted Red Cross and its emblem for the amelioration of conditions of wounded in the battle field. The nucleus of Indian Red Cross Society which is a part of the International movement was formed in the year 1920, though as act of parliament (Act XV of 1920).

The Andhra Pradesh State Branch as come into existence in the year 1956. H.E. the Governor of Andhra Pradesh is its President and Lady Governor is Chairperson

Red Cross provides assistance to victims of War, Natural Calamities, Disasters, Epidemics without discrimination of race, religion, creed, nationality, political opinions. In addition to its relief activities in emergencies, it promotes and undertakes activities of development and prevention of ill health, disease and preparedness of disasters.

Any person can help this international humanitarian effort by donation in cash or kind, and by enrolling as a member and serving voluntarily in any of its activities.

	<u>Type of Membership</u>	<u>Rates of Subscription</u>
1	Patron	Rs.20,000/-
2	Vice Patron	Rs.10,000/-
3	Life Member	Rs.500/-
4	Life Associate	Rs.250/-
5	Institutional Member	Rs.5,000/- per annum
6	Annual Member	Rs.100/- per annum
7	Annual Associate	Rs.50/- per annum

(*Annual members shall have no right to vote)

Persons who have been members of above 1-4 Categories for more than six months are eligible to vote, and for more than a year or eligible to contest.

(To become members of Junior Red Cross and Youth Red Cross, please consult nearest Red Cross Branch.)

DONATIONS TO RED CROSS ARE COVERED FOR TAX EXEMPTIONS UNDER 80 G

ACTIVITIES OF RED CROSS

<u>Code</u>	<u>Activity</u>	<u>Code</u>	<u>Activity</u>
1	IEC (Information, Education, Communication)	2	Membership promotion
3	Fund Raising	4	Office Assistance
5	Rescue	6	Relief
7	Rehabilitation	8	Preparedness Trainer
9	Institution Management	10	Junior Red Cross
11	Youth Red Cross	12	Sanitation Promotion
13	Health Camps	14	Blood donation Camp
15	Assistance of Senior Citizens	16	Assistance to Handicapped
17	Personal Hygiene promotion	18	Medical Relief (Doctors, Nurses Para Medics only)
19	Civil construction maintenance (Profession only)	20	Counselling/AIDS & Others
21	Family planning	22	First Aid
23	Ambulance Services	24	Transport
25	Orphanages	26	Press Relations
27	Skill training	28	Monitoring & Evaluation
29	Others (specify)	30	Others (specify)

(For information contact the State Branch Office)