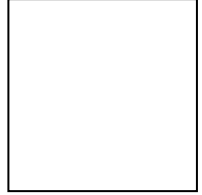


**Enrolment Form – A**

**ASSOCIATION OF RADIO & TELEVISION ENGINEERING EMPLOYEES**  
**Regd. Office : Allahabad, Camp Office : Room No. 134, DDK Delhi,**  
**Doordarshan Bhawan, Copernicus Marg,**  
**New Delhi – 110 001.**

(Registered under Societies Registration Act 1860)

To,  
The General Secretary,  
ARTEE,  
New Delhi – 110 001.



Sir,

I, ..... desire to be enrolled as a member of the ARTEE and shall abide by the Articles, regulations, byelaws of the association.

**I am ready to submit Letter of Authorization in favor of ARTEE & ready to pay the membership fee of Rs 20/- per month or Rs.240/- per year through check off system from my salary; as per RSA rule 1993.**

Date :

Signature:

**Member's Biodata**

1. Name in full : .....
2. Designation : .....
3. Name of Station : .....
4. Date of Joining Department : dd/mm/yyyy ...../...../.....
5. Date of Retirement (dd/mm/yyyy) ...../...../.....
6. Date of Birth : .....
7. Qualification : .....
7. Permanent Address : .....  
.....
8. Residential Address : .....  
.....
9. Name of the Nominee : .....  
Relation with Member : .....

(Pl send 02 nos. passport size photographs of self)

**[UNIT SECRETARY]**

**[GENERAL SECRETARY]**

**(Undertaking as per Clause 2.2, 2.3 and 2.4 of DOPT OM No. 2/10/80-JCA 31<sup>st</sup> Jan' 1994)**  
**(Fresh Joining)**  
Annexure - II

LETTER TO BE SUBMITTED TO THE HEAD OF OFFICE/ DDO FOR AUTHORISATION  
UNDER CCS (RSA) RULES 1993.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_

Designation \_\_\_\_\_ Place of Posting \_\_\_\_\_

I hereby wish to **Join ARTEE** and Authorize you for deduction of annual subscription of Rs.20/- month/ Rs.240 /- year from my salary and authorize its payment to the Association of Radio & Television Engineering Employees (ARTEE).

This supersedes any undertaking whatsoever given by me earlier

Signature :

Name :

Designation :

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TO BE FILLED IN BY THE ASSOCIATION

It is certified that Sh./Smt. \_\_\_\_\_

Is a member of \_\_\_\_\_ Association. It is further certified that the above authorization has been filed by Shri/Smt/Ms . \_\_\_\_\_ in my presence.

Signature of authorized Office bearer.

(Name of office bearer in capital letters)

Attestation by Head of office