



# Ludhiana Sahodaya School Complex

## Application Form for New Members

1. Name of School \_\_\_\_\_  
 with Complete Address \_\_\_\_\_  
 \_\_\_\_\_

2. School Affiliation No. \_\_\_\_\_

3. Level of School      Secondary       Senior Secondary

4. Year of Establishment \_\_\_\_\_

5. Name of Trust/Society \_\_\_\_\_

6. Contact Details (School) :-  
 • Landline No. \_\_\_\_\_  
 • Mobile No. \_\_\_\_\_  
 • Fax No. \_\_\_\_\_  
 • E-mail id \_\_\_\_\_

7. Name of Principal \_\_\_\_\_  
 Contact No. \_\_\_\_\_      E-mail \_\_\_\_\_

8. Total No. of Students \_\_\_\_\_

9. Total No. of staff members \_\_\_\_\_

10. Total Area of school \_\_\_\_\_

11. Sports Facilities Available (give detail):-  
 (i) \_\_\_\_\_  
 (ii) \_\_\_\_\_  
 (iii) \_\_\_\_\_  
 (iv) \_\_\_\_\_  
 (v) \_\_\_\_\_  
 (vi) \_\_\_\_\_

12. Capacity of Auditorium/Hall with size \_\_\_\_\_

13. Was the school previously a member of any Sahodaya  Yes  No

If yes give detail \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14. Payment Details.:-

(i) Annual Membership Fee Rs. 5000/-

DD/Ch. No. .... Dt. ....

(DD/Ch. should be in favour of Sahodaya Schools Complex Ludhiana and DD should be payable at Ludhiana.)

**Declaration**

- The school will participate actively in the Sahodaya Inter School Activities/Competitions.
- The Principal will himself/herself attend the meetings organised by LSSC.
- The School will abide by the rules of LSSC
- The School will pay annual Membership fee regularly.

Signature of Principal .....

Date .....

Place .....

Signature of Manager .....

Date .....

Place .....



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**- For office use only**

Date of Receipt of Application Form .....

Date of confirmation of Membership .....

Membership Number Allotted .....

Signature of Director  
LSSC