

**RAJENDRA SINHJI ARMY MESS AND INSTITUTE (RSAMI), PUNE**  
**ASSOCIATE MEMBERSHIP APPLICATION FORM**  
**(TO BE FILLED IN BLOCK CAPITAL LETTERS)**

**The Chairman**  
**Rajendra Sinhji Army Mess and Institute**  
**C/o HQ Southern Command**  
**No. 1, Ashoka Marg, Pune-411001**

PHOTOGRAPH  
(IN CIVIL DRESS)

1. I am retired officer / Widow with pension of the Army/Navy/Air Force. May I request you to kindly make me a Associates Member of RSAMI, Pune on depositing of required Non Refundable Entry Fee, Refundable Membership Security Deposit and subscription in this regard. My particulars are given below:-

- (a) No: \_\_\_\_\_ Rank: \_\_\_\_\_ Name: \_\_\_\_\_
- (b) Date of Birth: \_\_\_\_\_ (c) Date of Commission: \_\_\_\_\_
- (d) Date of Retirement: \_\_\_\_\_ (e) PPO No: \_\_\_\_\_ (Photocopy att)
- (f) Present Address: \_\_\_\_\_
- (g) (I) Permanent Address at Pune: \_\_\_\_\_  
: \_\_\_\_\_
- (II) Telephone No : \_\_\_\_\_
- (III) Mob No : \_\_\_\_\_ (for SMS Service of RSAMI-Only One No to be given)
- (iv) E Mail ID : \_\_\_\_\_
- (v) Alternate Mob No: \_\_\_\_\_
- (h) **Address/Property Proof.** Aadhar Card.
- (j) Staying in Pune Since \_\_\_\_\_

2. I am willing to pay the laid down entrance fee (Rs \_\_\_\_\_ Non-refundable)

**UNDERTAKING**

3. I and dependent members of my family will abide by RSAMI Rules and Bye Laws and instrs given on Notice Bds/RSAMI Website or through Secretary, RSAMI, Pune as issued from time to time. I am aware that an infringement on the above on my part or my dependents/quests will constitute a breach of trust and my membership of RSAMI may be terminated by MGT of RSAMI, Pune without notice

Station: \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
(Signature of the applicant)

**TO BE SPONSORED BY ASSOCIATE MEMBERS OF RSAMI, PUNE**  
**(I CERTIFY THAT I WILL HAVE FULL LIABILITY TO CLEAR ALL THE DUES, IN CASE OF ABOVE**  
**SPONSORED OFFICER/ WIDOW DEFAULTS ON PAYMENT OF ANY DUES OF RSAMI)**  
**(IN BLOCK LETTERS)**

Name : \_\_\_\_\_ Rank \_\_\_\_\_ Membership No : \_\_\_\_\_

Address : \_\_\_\_\_

Date : \_\_\_\_\_ Signature : \_\_\_\_\_

**4. Other Particulars of Officer**

(a) (i) Last appointment held : \_\_\_\_\_

(ii) Last Unit : \_\_\_\_\_

(b) Particulars of current : \_\_\_\_\_  
Employment if any after retirement

(i) Address of employer : \_\_\_\_\_

5. Particulars of spouse and dependent family members of applicant in terms of note to Para 10 of RSAMI, Rule, and Bye Laws 2019, which reads that 'family' would include dependent parents (as per para 9), unmarried daughters irrespective of age and sons up to the age of 25 years. A son/daughter employed and married daughter irrespective of age will be treated at par with other guests.

Sr No	Name	Date of Birth	Relationship	Occupation
(a)				
(b)				
(c)				
(d)				

Station : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

**SPECIMAN SIGNATURE OF THE APPLICANT****(Please sign in both columns)**

Rank: _____	1. _____
Name: _____	2. _____

**6. Note:-**

- Rs 220/- (Non Refundable) is required to be deposited for Registration fee and cost of the form for membership. Draft/ Cheque should be issued in favour of Chairman RSI, Pune.
- Age Proof/ Certificate for dependents is required to be attached with application (Aadhar card).
- Address / Property Proof.** Aadhar card required to be attached.
- Photocopy of PPO to be attached.
- Two passport colour photograph each of self and dependents is required to be submitted.
- Also read General Instructions on reverse of this page.

**UNDERTAKING BY THE APPLICANT FOR ASSOCIATE MEMBERSHIP OF RSAMI PUNE**

- By submitting this application form and on approval of Associate Membership, I and my dependents and guests shall be bounded by RSAMI Rules and Bye Laws and agrees to comply with notices displayed on RSAMI Website/Notice Bds/Instrs given in Monthly News Letters/What's app/SMS/Email or Passed/issued by Secy, RSAMI, Pune from time to time.
- I will surrender the membership card of self and dependents on termination of RSAMI Associate Membership. I will also deposit the RSAMI Membership Card of my non entitled dependents as and when they become non- entitled dependents as per RSAMI, Pune Rules and Bye Laws. Any misuse on this account may please be penalized by levying of fine of Rs 1000/- per occurrence, incl termination of my Membership of RSAMI, Pune.
- Certificate for unmarried/ un-employed daughter above 25 yrs of age who is dependent member and is in possession of RSAMI Smart Card:-  

“My daughter : \_\_\_\_\_ Age \_\_\_\_\_ Years (Dt of Birth) \_\_\_\_\_ is un-employed/ un-married. I undertake to inform RSAMI, Pune immediately on change of her above status falling which / on being facts found to be contrary, my membership may terminated”.
- I shall inform the change of status of self and dependents imdt on occurrence.
- I understand that only I am authorised to make my representation/ complaint with RSAMI, Pune and shall brief my dependents and guests visiting RSAMI, Pune accordingly.
- If there is any lapse / infringement/ commission/ omission/ neglect/ non-compliance on any of the above given undertaking by self, my dependents, and guests, the Mgt, RSAMI, Pune may levy fine to be decided by the Mgt incl termination of my Associate Membership of RSAMI, Pune without my notice.

Dated : \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)**FOR OFFICE USE ONLY**

- Regn Fee Paid (Non Refundable) Rs \_\_\_\_\_ Receipt No and date \_\_\_\_\_.
- Entry Fee Paid [Non Refundable) Rs \_\_\_\_\_ Receipt No and date \_\_\_\_\_.
- Security Deposit (Refundable) Rs \_\_\_\_\_ Receipt No and date \_\_\_\_\_.
- Particulars entered in the Membership Register and data added in the Computer.
- Total No of \_\_\_\_\_ Associate Membership Cards Issued.
- Card No Issued \_\_\_\_\_.

\_\_\_\_\_  
(Signature the Dealing Clk)\_\_\_\_\_  
(Signature of the Secy RSAMI)

**PART-I****GEN INSTRUCTIONS: SUBSCRIPTION OF ASSOCIATE MEMBER**

<b>Ser No</b>	<b>Description</b>	<b>Rate</b>
1.	Non-refundable one time Entrance Fees	15000/-
2.	Refundable security deposit	7500/-
3.	Monthly subscription (Below 70 years)	700/- pm
4.	Monthly subscription (Sr Citizen above 70 years)	500/- pm
5.	Monthly subscription widow	500/- pm
6.	Monthly subscription Out Stn Membership	700/- pm
7.	Staff Diwall Box (Once in a year)	250/-
8.	Misc Charges (Once in a year) (Paper plates/Tissue papers etc)	150/-
9.	Smart Card Charges one time (each card)	125/-

**PART-II****Documents to be attached**

1. Application with Bank details for closure of existing service membership (for existing service members only)
2. Rs 220/- (Non Refundable) is required to be deposited for Registration fee and cost of the form for membership. Draft/Cheque should be issued in favour of **Chairman RSI, Pune,**
3. Age Proof - Aadhar Card.
4. Undertaking Certificate.
  - (a) For daughter over 25 years of age un-employed/ un-married and dependent member to inform immediately n change of her above status.
  - (b) For parents that my dependent Father/ Mother as on date are not earning/ drawing pension of any nature from Govt/ PSU/ Any Pvt Sector/ Agency.
5. **Address/ Property Proof** - Aadhar Card.
6. Photocopy of PPO to be attached.
7. Two Passport colour photographs each of self and dependents is required to be submitted.
8. Aadhar Card copy of all members to verify date of birth.
9. Disability certificate of the competent medical authority in respect of permanent handicapped Son/ Daughter.
10. **Documents required for Widow Members.**
  - (a) Death Certificate copy of the Late Officer member.
  - (b) PPO Copy Showing Name of the Widow.