



Recognised
Regd. No. S-21593

Airports Authority Officers' Association (India)

CHQ: T-1/4, I.N.A. Colony, New Delhi – 110023

Enrolment Form

Name (in Block Letters):Mr/Ms _____

Designation: _____ CNS No. (if Any) _____

Employee No. _____ Date of Birth: _____

Station of Posting: _____

Date of Joining CAD/NAA/AAI: _____

Contact No.: _____

Email id: _____

DECLARATION & APPLICATION

I certify that Particulars as furnished above are correct. I am a current/ enrolling as a new member of AAOA (India). I have fully acquainted myself with the Constitution of AAOA (India) & agree to abide by the same.

Date

.....
Signature of Applicant

RECOMMENDATION OF REGIONAL/ BRANCH SECRETARY

.....
Regional/ Branch Secretary

Mr./ Ms. Designation

is a / has been admitted as a member of AAOA (India). His/ her membership No is

.....
General Secretary