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Date: / /20

REGISTRATION FORM PIRENS ALUMNI ASSOCIATION(PAA)

To,

The Director,

**PIRENS Institute of Business Management & Administration,
Loni (BK), Tal- Rahata, Dist – Ahmednager-413736**

Affix Your
Recent
Photograph

Respected Sir/Madam,

I Mr. /Mrs. /..... enrolled for MBA / MCA/ B.Voc Course for the Academic year 2020-2021. I would like to request you to register me as a PIRENS Alumni Association member. I have Paid Rs.1000/- as a membership fee through Cash / Bank Challan / DD / Cheque / Receipt No Dated.....

My Personal details are as follows.

Full Name:

..... (Name) (Last Name) (First Name) (Middle e)

Permanent Address:

..... Pin code :
Date of Birth:/...../.....

Mobile No:

Aadhar UID No..... Email ID:

.....

(Signature of Student)

(Director, PIRENS IBMA)