



HUMAN RIGHTS PROTECTION COUNCIL OF INDIA

Access to Justice and Human Rights for all

Application Form for HRPCI Membership

To be filled by the applicant

Please read the deed of discharge, release and indemnity and guide lines before filling up the form.

Photograph
Of The
Candidate with
Signature

Personal Information:

	First Name	Middle Name	Last Name
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father's / Husband's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Birth Date	<input type="text"/>	House No	<input type="text"/>
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	City	<input type="text"/>
Martial Satus	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried	District	<input type="text"/>
Blood Group	<input type="text"/>	State	<input type="text"/>
Profession	<input type="text"/>	Country	<input type="text"/>
Religion	<input type="text"/>	Postal code	<input type="text"/>
Nationality	<input type="text"/>	Cell No	<input type="text"/>
Adhar card no	<input type="text"/>	Land No	<input type="text"/>
Pan card no	<input type="text"/>	E Mail	<input type="text"/>

- | | | |
|---|--------------------------|--------------------------|
| | Yes | No |
| 1) Has the candidate previously been the member of the HRPCI? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Is the candidate a member of, or previously been a member of any other non profit Organization | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Has the candidate been involved with any social activities in the past? | <input type="checkbox"/> | <input type="checkbox"/> |

Preferences of the candidate for the kind of work he/she would like to get involved in HRPCI

1. _____
2. _____

HRPCI

Attached Document's copies:

1. Passport / Ration Card / Driver's License / MSEB Bill / Telephone Bill / Election Card / Adhar Card any two for address proof
2. No Criminal Record Certificate from concerned Police Station (NOC)
3. PAN Card
4. Two pass port size photo graphs with signature on the back of second photo
5. DD of Rs.250/- for Active Membership.
6. DD should be in name/favor of Human Rights Protection Council of India / Payable at Kakinada only.

Deed of Discharge, Release and Indemnity:

- 1) The member agrees to abide by the rules of Human Rights Protection Council of India at all times.
- 2) **Release and Discharge:**
The member release, discharges, waive and forever holds harmless from all claims or for any loss sustained by the member whether caused by negligent actor willful act or omission, breach of contract, breach of statutory duty or otherwise in connection with HRPCI.
- 3) **Indemnity:**
The member indemnifies HRPCI against all claims for any loss sustained by the member whether caused by negligent act or willful act or omission, breach of contract, breach of statutory duty or otherwise in connection with HRPCI.
- 4) **Warranty as to Age:**
By personally executing this deed, the candidate warrants that the/she is at least of 21 years of age and 18 years for youth cell.
- 5) **Bar to Action:**
The candidate agrees that his deed may be pleaded at a bar to any action, suit or proceedings taken at any time by the candidate against HRPCI arising out of or as a consequence of HRPCI any incidental activities.
- 6) **Confidentiality:**
The candidate must keep the terms of this deed strictly confidential and no disclosures of the terms of this deed is to be made by the candidate other than for the purpose of obtaining legal advice.
- 7) **Definitions:**
In this deed unless inconsistent with the context and subject matters HRPCI "All claims " means all claims, actions, suit, demands, damages, interest, and costs arising out of or as a consequence of including any incidental activity."Any loss" means any loss, damage or injury to person (including candidate) or property included but not limited to any.
- 8) **Signatures:**
Signatures executed as a deed.

Iwish to become a member of **HRPCI**.I understand that the process requires my application to be approved by the board of members of **HRPCI**.

"I hereby solemnly and sincerely affirm that the information along with the documents furnished by me in the application form is true and correct .I haven at concealed any information. However if any information furnished here in is fraudulent, , incorrect or untrue,

I understand that I am liable to criminal prosecution and also agreed of or ego my membership of Human Rights Protection Council of India (HRPCI). Further that the membership of HRPCI liable to be cancelled. I have read the deed of discharge, release and indemnity and agree to abide by it".

Place: _____

Date : _____

HRPCI

Signature of the Candidate

To be filled by the Witness

Witness Name : _____

Address : _____

Phone:

Profession

I,/Mr. / Mrs./Miss know the applicant personally for a period of months and confirm that to the best of my knowledge ,he/she is suitable for the years membership.

Place: _____

Date: _____

Signature of the Witness

For office use only Mandal /District/State/National/International Body Office of HRPCI or Any Cell of HRPCI.

This is to confirm that the information given by the candidate in the application has been checked for validity and that the documents enclosed have been verified. The candidate is found suitable for the membership of HRPCI.

Signature of the.....(Designation)
Body-Office at Mandal/District/State/National.....
OR.....Cell At Mandal/District/State/National.....

For office use only (International Body Office of HRPCI)

The candidate is found eligible or the membership HRPCI and is nominated as the.....at.....
.....place.....country.

OR

The candidate's application has been rejected.

Place: _____

Date: _____

Member ship No. Allotted

Mr. Talluri Prasanna Kumar
Founder President
HRPCI

Guidelines For Filling The Application:

- 1) Fill the application form correctly and completely .Place an ' X ' in appropriate box.
- 2). Two identical copies of passport size recently taken ID photographs with signature on the back of 2nd photo are necessary. **HRPCI**
- 3). Name and Address should be written in capital letters only.
- 4). Application and Related Material should be posted to the following address given below.
Human Rights Protection Council of India, D.No.2-36-10, Perrajupeta, Kakinada, E.G.Dist, A.P., India. 533005.
- 5). To be effective as a deed, candidate's execution of this document must be signed in the presence of a witness who must sign in the place provided
- 6). For any enquiries regarding membership issues, e-mail at **hrpcfndia @ gmail.com** or call us **8099059444, 8886614444**. For any other information visit the web site

www.hrpcfndia.org