

# Indian Red Cross Society

## Karnataka State Branch

### APPLICATION FORM FOR REGISTRATION OF SCHOOLS AND ENROLMENT OF STUDENT MEMBERS IN THE JUNIOR RED CROSS

From,

Date:-.....

The Principal

.....College  
.....Address  
.....Taluk  
.....District  
Pin Code.....

To,  
The General Secretary  
Indian Red Cross Society  
Karnataka State Branch  
#26, Red Cross Bhavan,  
1st Floor, Race Course Road,  
Bengaluru – 560001

Dear Sir/Madam,

We propose to form a Junior Red Cross Wing in our school. There are..... students  
(Mention no of students) studying in different classes.

Please find enclosed Junior Red Cross registration fee of Rs.100(One Hundred only) through DD/Cheque  
No .....date.....drawn on .....Bank (mention the name  
of the bank).....Branch(mention name of the place).

Yours faithfully

Name, Signature and Designation  
Seal of the College/Institution

Please note:- All Cheques and DD's Should be drawn in favor of General Secretary, Indian Red Cross  
Society, Karnataka State Branch, Payable at Bangalore.