



Know Your Primary Member FORM

FIRST NAME

MIDDLE NAME

LAST NAME

Membership Number *		PHOTO
First Name *		
Middle Name *		
Last Name *		
Gender *		
Date Of Birth *		
Marital Status *		
Email		Signature
Mobile / Landline *		
Vehicle No.		
Liquor Licence no.		
Identification Type & No. *		

Residential Address *	
City *	
Pincode *	
State *	
Residential Phone *	
Company Address	
City	
Pincode	
State	
Company Phone	
Billing Address *	
City *	
Pincode *	
State *	

PRIMARY MEMBER SIGNATURE :-

NOTES:-
Please attach scanned copies of the Undermentioned for Primary Member
Scanned Copy of the Membership Card
For Identity Proof -Passport\Driving Licence\Pan card\Voter ID (Aadhar card not accepted)
For Address Proof - Passport\Driving Licence (Aadhar not accepted)
For CORPORATE MEMBERS, Company ID card/visiting card for company addr proof

PLEASE FILL AND SAVE THE FORM AND EMAIL IT ALONG WITH
THE SCANNED COPIES OF THE DOCUMENTS TO
kym@khargymkhana.com