



LAHORE  
CONSERVATION  
SOCIETY

<b>MEMBERSHIP FORM</b>	
Name:	
Father/Spouse:	Date of Birth
Profession:	CNIC#
Educational Qualifications:	Telephone:
Postal Address	Cell Phone
	Email
Affiliations:	Interests:
I agree to, and accept, the Articles of Association, Rules & Regulations, and aims and objectives of the LAHORE CONSERVATION SOCIETY, and undertake to abide by them.	Signatures:  Date:
<b>PROPOSED BY:</b>	
Name:	Signatures:  Date:
Address	
<b><u>Annual Membership Fees : PKR 2000</u></b>	
Paid:	
Date:	
Valid until:	

**NOTES:**

1. New members will be proposed by the existing members.
2. Memorandum of Association & Rules & Regulations are available at [www.lcs.org.pk](http://www.lcs.org.pk)