



## I LOVE MY CITY

A Revolution in Making

### ILMC REGISTRATION CARD

Personal Details

[Please enter in block letters]

First Name : \_\_\_\_\_

Last Name : \_\_\_\_\_

Name I liked to be called \_\_\_\_\_  
(If Different from First Name)

Address: \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_ State \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Extn. \_\_\_\_\_

Mobile Phone : \_\_\_\_\_ E-mail Address : \_\_\_\_\_

*Please let us know your preference for reaching you :* Home Phone  Work Phone  Mob. Phone  E-mail

Please let us know preferred Time : 10:00 AM - 2:00 PM  2:00 PM - 6:00 PM  6:00 PM - 10:00 PM

Date of Birth    Sex : Male  Female  Marital Status : Married  Unmarried

Occupation or Profession \_\_\_\_\_

Job title or Position : \_\_\_\_\_

**How do you came to Know about 'I Love My City' program**

**What is your aspirations for the City**

Please write your dream about the City and what can be done to make it happen!!

Rs. \_\_\_\_\_

Member's Collection (Minimum Rs. 100/- only)

Member's Signature

ILMC Reg No: \_\_\_\_\_

( D D M M Y Y )

A Social Awareness & Voluntary Organization  
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