



# L. N. M. U. ALUMNI ASSOCIATION

## LALIT NARAYAN MITHILA UNIVERSITY

Kameshwaranagar, Darbhanga – 846004 (Bihar)

www.lnmu.ac.in

### INVITATION

Alumni of L. N. Mithila University are hereby requested to enroll themselves as life members of the LNMU Alumni Association through remittance of one time membership fee of Rs. 3,000/- only while submitting duly-filled in **Membership Form** available on the university website.

You are also cordially invited to participate in the first ever **Alumni Meet-cum-Seminar – 2018** being organized on **February 26<sup>th</sup>, 2018** under the aegis of LNMU Alumni Association. Additional remittance of registration fee of Rs. 500/- only along with journey details will be required by **February 15<sup>th</sup>, 2018** without fail for necessary arrangements for your accommodation, if needed. Please complete the **Registration Form** available on University website along with the **Membership Form**.

Soliciting your heartwarming and unflinching response:

**Dr. Raman Jha**

- **President**

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- **Joint Secretary**

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Sd./-

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## Membership Fee/Contribution/Donation Remittance Form

1. Name:

2. Father's Name:

3. Date of Birth:

4. Gender: Male/Female

5. Academic Qualifications :

Exam. Passed	Year	Board/University	% Marks	Division/Class

6. Present Designation/Occupation :

7. Present mailing Address:

8. Mobile No.

Email ID:

9. Permanent Mailing Address:

10. Awards/Distinctions/Felicitations received:

11. Membership(Rs. 3000/-)/Contribution/Donation Remittance Details:

Cheque No. /DD No./NEFT/RTGS Transaction No. ....

Date..... of Rs.....

towards Membership/Contribution/Donation (payable to LNMU Alumni Association  
A/C No. 622700011862, Punjab National Bank, LNMU Campus Branch, Darbhanga  
(IFSC Code PNB0622700)

*I hereby declare that the information given above are correct to the best of my knowledge.*

Place.....

Date.....

Signature

Membership Awarded/Contribution/Donation received

Assistant

Chairman, LNMUAA



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L.N.M.U. ALUMNI MEET – 2018

## REGISTRATION FORM

Name (Capital Letters) : .....

Gender : .....

Designation : Faculty Member / Student (**Please tick** ✓)

Name of the Institution / Department : .....

Correspondence Address : .....

Mobile Number : +91 .....

E-mail Id : .....

**Registration Fee (For Faculty Members Rs. 500/- and Students Rs. 100/-)**

DD (In favour of **LNMU ALUMNI ASSOCIATION**) / CASH (**Please tick** ✓)

DD No.: ..... Date:..... Drawn Bank: .....

Date:.....

Signature of Applicant

## RECEIPT

An Amount of Rs. .... by Cash/DD received from .....  
department of ..... towards **L. N. M. U. Alumni Meet – 2018** registration  
fee.

**HoD/Receiving Officer**