

Affiliation & License Application Form for Residents Welfare Association RWAs

From

**President & Office Bearers,
Residents Welfare Association,
Address:
.....
.....**

To

**ExNoRa International,
40 Rams Apartments,
T Nagar, Chennai 600 017.**

Sir

We send herewith Rs 500/- admission fee and annual subscription Rs 500/-and we request you to grant affiliation and ExNoRa License to our Residents Welfare Association. We have decided to carry on..... ExNoRa, as an activity of our Residents Welfare Association. We assure you that we will conduct the affairs of our organisation as per the objectives of ExNoRa.

Yours Faithfully

(Note: - Names, Mobile Numbers, E mail Ids Use a separate sheet)