

Application for Life Membership

Form No.CMA/A/	
Particulars of Applicant :-	
1. Name of the Applicant:	
2. Address:	
3. Contact No:	
4. Date of Birth:	
5. Education:	
6. Musical Qualification (if any):	
7. Instrument:	
Please provide the following:- Proof of residence such as Passport. Aadhar Card. Voter ID. (Any one	of these)
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 I agree to abide by the rules and regulations of CMA (Mumbai), admis the decision of the Judges and Managing Committee will be binding 	
2. I note that any form of canvassing on my part or in my favor will ome for being called for an audition.	lisqualify
3. I also note that if I fail to appear for the audition on the day specific association, I will be automatically disqualified from this application	The state of the s
4. On becoming a life member of the association, I hereby promise the abide to the rules and regulations as per its constitution.	nat I will
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(Signature of Applicant) (Date)	