

The Chairperson,
Dzongkhag Welfare Fund Scheme,
Dzongkhag Administration
Dungsum Pema Gatshel

Sub: Declaration of Membership

Dasho,

I Dasho/Dr./Mr./Mrs./Ms..... bearing CID/EID No..... do hereby declare that I have read and understood the rules and regulations of PDZWS as outlined in the Scheme By-laws. Having read this, I wish to become a registered member of Welfare Scheme.

As a registered member I do hereby declare that I shall abide by the PDZWS By-laws and regulations, which may be reviewed and amended from time to time. In case, I am found guilty of breaching the rules and regulations, I shall be abided the decision of the Dzongkhag Welfare Management Committee.

I, hereby, authorize the Dzongkhag Welfare Committee to deduct my monthly contribution of Nu **150.00** per month from my salary as described in the Dzongkhag Welfare Scheme By-law.

Home Address: (CID photocopy)

Full name:
Village:
Gewog:
Dungkhag:
Dzongkhag:
BoB Account No.:
Date:

*Affix Legal
Stamp
Signature*

Present Address:

Sector:
Designation:
Workplace:
Gewog:
Dzongkhag:

For Welfare Committee USE ONLY

Dasho/Dr./Mr./Mrs/Ms is hereby registered as a member with effect fromof Dzongkhag Welfare Scheme of Pema Gatshel Dzongkhag.

Chairperson

Executive Secretary

Treasurer

Standing instruction details to transfer monthly contribution to Zhiwog Welfare account.

Name:

CID:

Account Number:

Bank Name:

Branch:

Amount: **Nu.150**, (Additional **Nu.350** to be deducted at the first month of registration as membership registration fee)

Signature and date: