



Membership
Protecting Human Rights

Form

(2020-21 Individuals)

Let's volunteer for a better tomorrow

Thankyou for your interest in becoming a member of SWO .Please fill out this form completely and mail to us at: **Info@starwelfare.org** .

Please select from the following:



STARWELFARE ORGANIZATION



HAWASHELTER



SWO TV



WEEKLY NEWSPAPER

Your Photo

Payment Options:

I wish to make the following payments

Note: All amounts are for annual subscriptions and are subject to be renewed every year.

(Please tick & fill the appropriate boxes)

District Officer	5000 Rs	
National Lever Officer	10,000 Rs	
Member	1000 Rs	



1. Muslim Commercial Bank

MCB Bank: Muslim Commercial Bank
Acc Title: Starwelfare Organization
Online Acc No. 0124201010018281
IBAN: PK56MUCB0124201010018281
Branch: Fatima Jinnah Road, Sargodha, Pakistan

2. Bank of Punjab

BOP Bank. Bank of Punjab
Acc Title. Starwelfare Organization
Online Acc No. 6510137224500015
Branch: ShaheenChowk, Sargodha, Pakistan

3. First Women Bank

TFW Bank. The First Women Bank
Acc Title. Starwelfare Organization
Online Acc No. 0033022516210000
IBAN: PK16FWOM0033022516210000
Branch: University Road Sargodha

4. The First Microfinance Bank

TFW Bank. The First Microfinance Bank
Acc Title. Starwelfare Organization
Online Acc No. 0021011195601018
Branch: Chandni Chowk Murree Road Rawalpindi

5. The First Women Bank

TFW Bank. The First Women Bank
Acc Title. Starwelfare Organization
Online Acc No. 0018023566510000
Swift Code: PK52FWOM0018023566510000
Branch: Chandni Chowk Murree Road Rawalpindi

You can direct deposit through **Jazz Cash** on Cell Phone No. +92300-9607123
or **easy paisa** +923216001323

Head Office:

Street No 2, Nai Abadi kot fareed, Sargodha, Pakistan
+9248 3717220, +923009607123

Personal Data

Full Name: _____ S/O, D/O, W/O _____

Date of Birth _____ Gender: Male Female

Religion _____

NIC:

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Qualification: _____

Profession: _____ Blood Group: _____

Residential Address: _____

State/Province: _____ Country: _____

Email: _____

Skype ID: _____

Cell #: _____ Landline: _____

Address: _____

Designation: _____ Experience: _____

Length of time you want to volunteer _____

Reference: _____

I here by declare that all information provided above are correct and true to the best of my knowledge and that I allow the use of the information for any fair and lawfull purpose.

Applicant Signature

Note: Please Attach following Documents:

- 1. CNIC Copy
- 2. Qualification Copy
- 3. Experience Letter
- 4. 2 Passport Size Pictures
- 5. Bank draft of payement

TERM & CONDITIONS:

- 1. All drafts or Pay orders to be made out in the name of Star Welfare Organization. Membership Fee is for each calendar year.
- 2. Right to vote in SWO election available to new members only on completion of six months of paid membership.

Office Use Only

Receipt No.....	Validity of the membership
Dated.....	From..... to

Signature Chairmen

Signature President



Starwelfare
Protecting Human Rights

Undertaking

Terms & Conditions

I _____ From _____

ID/Passport _____ Mobile _____

hereby agree to provide my identity proof (CNIC or Passport Copy) for the membership of SWO.

I hereby declare that by becoming member of SWO I shall endeavour for social welfare and positive change in the society By becoming a member I undertake to:

- remain faithful of SWO and play my role for positive image of SWO.
- work for unity, peace, prosperity and human rights along with SWO.
- remain honest, ethical and faithful in everything SWO does.
- will follow the instruction and rules of SWO.
- take responsibility and initiative for peace, prosperity and Unity without any pressure and Salary package.
- never involve in any type of human rights violation activities.
- help other members is resolving an issue
- respect government institution and never go against them, especially the armed forces, police, Judiciary etc

SWO will never provide any type of backup support or help to those members who violates the law of country or they violate any human right by any mean or they involve in criminal activities etc. SWO reserve the right to reject, block, suspend or remove my Membership at any time without any notice or warning.

All copy rights reserved by A Starwelfare Organization.

Signature

Dated _____