

KARNATAKA GOLF ASSOCIATION

1	Name of the Company
2	Corporate Account No.
3	Nomination in Place of
4	Details of New Nominee along with 2 photographs
	2. Designation
	3. Age / Date of Birth
	4. How long working in the Company
	Please confirm whether the nominee is a full time Director/Executive of the Company.
	6. Address for sending Monthly bills/Correspondence
5	Mobile/Phone/Fax/Email ID
6	Please furnish a Short Profile of the new nominee
	Certified that the particulars furnished as above are true to the best of our knowledge.
	Signature :
	Name :
	Designation & Company Seal :
	Attestation by the Statutory Auditors: