

ADITYA TRADING CONSULTANCY
CUSTOMER APPLICATION FORM

Name		
Father's Name/ Husband name		
Date of birth(age as on-01/03/2015)		
Gender		
Occupation		
Address For Communication		
District /Pin code		
Contact Number		
Email id		
Nominee's Name		
Relationship		
SCHEME SELECTED		1)ANANDHAM <input type="checkbox"/>
2)ASHTALAKSHMI <input type="checkbox"/>		3)AKSHAYA <input type="checkbox"/>
4)AISHWARYAM <input type="checkbox"/>		5)AMUTHASURABI <input type="checkbox"/>
BANK ACCOUNT DETAILS		
Bank Name		
Branch Name / IFSC CODE		
Account Holder Name		
Account Number		

Note: We hereby declare that all the above details are true and I agree to all the terms and conditions of the company ATC. The term and conditions stated in the disclaimer of www.mcxgreattips.com (ATC) are applicable to all the schemes.

Nominee

Customer

Paste
PP photo

Signature

Paste
PP photo

Signature

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