



Yellow Society New York Inc.

(A Non-Profit & Non-Political Organization)

Photo

2 x 2

2 COPY

Membership Registration Form

Date: _____

SL No: _____

YS Reg No: _____

Applicant Information

Name of Applicant: _____

Date of Birth _____ DMV ID NO _____ TLC ID NO _____

Address: House _____ Street _____ Apt _____

City _____ State _____ Zip _____

Address in Bangladesh: _____

In case Of Emergency

Person in USA _____ Relationship _____

Person in BD: _____ Relationship _____

Doctor's Certification

YES NO.

Have you ever been suffering from any diseases like: Cancer / Heart / HIV /any other life threatening diseases etc.?

If 'Yes' please explain in detail _____

If 'NO' Please attach Certificate from Your Physician.

Doctor Comments and Signature/ Seal (Attached in Extra Sheets).

Doctor Signature

- a) Are you under 45 years of age? YES NO.
- b) Are you currently driving Yellow Taxi/Uber/Lyft? YES NO. (If Yes please attach GPS reading, if no quit applying)
- c) Are you ever being a member of any organization of same nature? YES NO.

If 'yes' please provide the released order signed by the appropriate authority.

- d) Membership registration fee \$ _____ is enclosed in Check Cash Money Order

NOMINEE

Name of Nominee _____ Relationship _____

Address: House _____ Street _____ Apt _____

City _____ State _____ Zip _____

I, the undersigned do hereby solemnly affirm and declare that above state facts are true to my knowledge and I will abide by the constitution of the **Yellow Society New York Inc.**

Signature of the Applicant

Proposer's

Name of Proposer 1. _____

YS Reg NO _____ Signature _____ Date _____

Name of Proposer 2. _____

YS Reg NO _____ Signature _____ Date _____

Organization Secretary

Comment _____

Print Name _____ Signature _____ Date _____

 APPROVED **DENIED****Signature of The General Secretary****Signature of the President****For Office Use Only****Yellow Society New York Inc.****(A Non-Profit & Non-Political Organization)**

SL NO _____

Date _____

Name _____ YS Reg _____

Amount Received \$ _____ Check Cash Money Order APPROVED DENIED

Remark _____

Signature of General Secretary / President**Signature of Treasurer****Eligibility**

1. Age Should not be more than 45.
2. Applicant Should be active TLC Driver Such as Yellow Taxi/ Uber Lyft and must have active license holder.
3. Applicant should attach both DMV and TLC hack license color copy along with 2 copy 2 X 2 Photo with application.
4. Need to Submit last year tax return copy along with last six months Bank Statement as a proof.
5. You would be notified before membership day to appear physically along with ID & Hack License.
6. Incomplete form or wrong information will be considered as rejection.