

Please use **BLOCK CAPITALS**

Form Serial #: \_\_\_\_\_

### Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

National ID Card Number: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Blood Group: \_\_\_\_\_ Father's Name: \_\_\_\_\_

### Job Information

Designation: \_\_\_\_\_ Organization: \_\_\_\_\_

Duration at Present Bank (Years/Months): \_\_\_\_\_ Duration at Other Banks (Years/Months): \_\_\_\_\_

Duration with organization other than Bank: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

By signing this membership form I agree that any information provided by me will be used only by the Bankers' CTO Forum. I also agree to abide by the Rules and Regulations of the Forum as posted on the forum website ([www.bcto.org](http://www.bcto.org)).

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For Official Use Only

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Membership Type: (Tick One)

Fellow (Tk 5,000/year)	Honorary (Tk 5,000/year)	Associate (Tk 2,000/year)
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Payment Receive Date: \_\_\_\_\_ Payment Amount: \_\_\_\_\_

Payment Reference: \_\_\_\_\_ Membership Number: \_\_\_\_\_

\_\_\_\_\_  
Treasurer

\_\_\_\_\_  
General Secretary

\_\_\_\_\_  
President