



Sample Draft of Affidavit

AN AFFIDAVIT MUST BE SUBMITTED AS A MANDATORY DOCUMENT

Please type this declaration/oath certificate/Affidavit draft matters on Non- Judicial stamp paper of Rs. 100/- and same to be attested mandatory by the public Notary only.

(Without this Affidavit your application will not be accepted and rejected automatically)

I.....S/O,D/O,H/O Mrs/Mrs.....

Permanent Resident of

Mob No: State: PIN:

This is to declare the followings:-

1. The information provided by me in the Membership Form is true and correct.
2. There is no legal/medical legal case pending against me in any court of India/abroad.
3. That in future, I shall not hold the Indian Optometric Association responsible for any of my misconduct during my practice as an optometrist or as an individual. However it is entirely the discretion of IOA office to assist me /support me in case such situation arises in future.
4. That I shall immediately intimate the IOA office about my change of name/corresponding address and phone number as and whenever I do so in future.
5. That I shall follow the rules and regulations of the Association as lay down in its constitution as per the TAMILNADU SOCIETY ACT, 1975-78, (REGISTRATION NO-S/171/92)
6. I take oath that my university / board, my course / subject & session /duration of diploma/degree Approved / recognized at time of admission. I am only/solely responsible for the status of my education.
7. I am completely aware about the terms and conditions of association, fee once deposited in IOA account will not be refunded /cancelled at any cost or circumstances/conditions.
8. If there is any incomplete or wrong information mentioned in the form by me then the membership/application will not be accepted and rejected automatically.
9. IOA reserves the rights and is fully empowered whether to approve/accept or to reject the application without citing any reasons in the interest of association. However it is entirely to the discretion of IOA.
10. I agree to authorize the Executive Committee/Board of IOA to revoke/cancel /block my membership or impose fine, if IOA finds my any misconduct/activity against the constitution of IOA which harms or damages the image of the association .

You are sincerely requested to enroll undersigned as a member of an Association, as per the rules and regulations IOA.

Signature of Applicant:

Name of Applicant:

DATE :