

BOOK OF RECORD APPLICANT FORM

TYPE INDIVIDUAL / GROUP / ORGANIZATION

APPLICANT NAME –

ORGANIZATION NAME –

EMAIL ID –

CONTACT NO –

WEBSITE –

ADDRESS –

PINCODE –

STATE –

NATIONALITY –

RECORD ACTIVITY (PLEASE MENTION)

RECORD DATE –

RECORD TIME –

RECORD PLACE –

NAME OF FOUR WITNESS –

1 2.....

3..... 4.....

COMMENT BOX

DECLARATION: I,, hereby declare that the information provided by me is true and accurate to the best of my knowledge. If any information is found to be incorrect or misleading, my application will be automatically canceled by the Indian Eminent Book of Records.

DATE:

APPLICANT SIGNATURE:

