



Price: ` 1

PERMISSION TO RUN THE BENEFIT SHOW APPLICATION FORM

Applicant Details:-

Aadhar Number: _____
Applicant Name*: _____ Father/Husband/Guardian Name*: _____
Gender: Male Female Mobile Number*: _____ Email Id: _____

Applicant Permanent Address Details:-

District*: _____ Mandal*: _____
Village/Ward*: _____ Locality/Landmark: _____
Door No: _____ Pin code: _____ Delivery Type*: At Kiosk Post Local Post Non-Local

Postal Details:-

District*: _____ Mandal*: _____
Village/Ward*: _____ Locality/Landmark: _____
Door No: _____ Pin code: _____

Service Specific Details:-

Name of the Theater*: _____ Name of the Occasion/Festival*: _____
District*: _____ Mandal*: _____
Village/Ward*: _____ Locality/Landmark*: _____
Door No*: _____ Pin code*: _____
Show Date (DD/MM/YYYY)*: _____ Show Timings: _____ AM PM TO _____ AM PM

Informant Details:-

Informant Name*: _____ Relation*: _____

Documents List: - (NOTE: All Upload Documents should be in PDF Format only and the size should not exceed 3MB)

Application Form *

(* - Indicates Mandatory)

Applicant's Signature