THE NATIONAL COUNCIL OF YMCA\'s OF INDIA
Bharat Yuvak Bhavan, Jai Singh Road, New Delhi – 110 001

ANNUAL STATISTICAL REPORT
For the year ended March 31, 2022

I. GENERAL
A. 1. Name of YMCA ____________________________________________________________

2. Communication address: ___________________________________________________ Pin code ____________

3. Tel. No.:____________ E-mail (YMCA):__________________________

4. Name of the Panchayat/Municipality/Corporation: ____________________________

5. Date/year of establishment: __________________ 6. Region: _________________________

7. State/UT: __________________ 8. Date of Affiliation: ____________________________

9. Registration No. (Societies Regn)_________________________ 10. FCRA No. (if applicable): __________

11. GST Number. __________________________

B. Present Office-Bearers
   President: (Name & Address) __________________________________________________

   Secretary: (Name & Address) _________________________________________________

   Tel. No. ________________________ E-mail ________________________

   Tel. No. ________________________ E-mail ________________________

C. Board of Directors: No. of Board Meetings held during the year 2021-22 ________________
   Board of Directors: (30 years and above) Men: __________ Women: _______ Total: ________
   Youth (18 upto 30 years) Men: __________ Women: _______ Total: _______

D. Annual General Body Meeting (To adopt Annual Report, Accounts, Budget, and conduct Election of Board Members)
   Date/s of meeting: ___________________ No. of Full Members attended the AGM ________________

E. Staff: Professional Secretaries: Men: __________ Women: _______ Total: ________________

   Other Staff: Men: __________ Women: _______ Total: ________________

II. INFRASTRUCTURE:
   Land Details: Total area _______________ Survey No/s _______________
   Village __________________ Revenue Dist: __________________ Title Holder: __________________
   No. of Buildings _____________ Hostel: No. of rooms: __________________________
III. FINANCE/BUDGET:
1. Total Income as on 31.3.2022 : Rs:____________________
2. Total Expenditure as on 31.3.2022 : Rs:____________________
3. Fund raised during the year (2021-22) : Rs:____________________
4. Amount spent for charity (2021-22) : Rs:____________________
5. Budgeted Income for 2022-23 : Rs:____________________

IV. MEMBERSHIP
1. **Full Members**: Number of Full Members, (Christians 18 years and above are eligible)
   (i) Youth (18 to 29 years) Men: __________ Women: __________ Total: __________
   (ii) 30 years and above Men: __________ Women: __________ Total: __________
   Grand Total: __________

2. **Associate Members**:
   Number of Associate Members (including life members if any) Men____ Women____ Total____
   Faith Background Christians: _______ Hindus: _____ Muslims: ____ Others ______

3. **Total Membership by age** (covering all categories of membership)
   (1) Upto 18 years Boys __________ Girls __________ Total ______
   (2) 18 upto 30 years Men __________ Women __________ Total ______
   (3) 30 years & Above Men __________ Women __________ Total ______ Total: ______

V. PROGRAMME/SERVICES DELIVERED DURING THE YEAR

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Programme/Service area</th>
<th>Name of the Activity conducted and date</th>
<th>No. of people participated</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Programme for Members</td>
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<tr>
<td>02</td>
<td>Religious activities</td>
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<td></td>
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<tr>
<td>03</td>
<td>Youth Empowerment</td>
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<td>04</td>
<td>Sports and Games activities</td>
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<td>05</td>
<td>Social Service/Charity</td>
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<td>06</td>
<td>Environmental programmes</td>
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<tr>
<td>07</td>
<td>Women Empowerment</td>
<td></td>
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</tbody>
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Name & Signature of President Name & Signature of General Secretary/Hony Secretary/Secretary

Place __________ Office Seal Date __________

Signature of the Regional Secretary Office Seal Date __________

Please fill the forms in triplicate to be sent to the Respective Regional Secretary, the second copy to the Movement Strengthening Department to reach on or before September 30, 2022. Please retain the third copy for your office record. For Bank Transfer: Kindly mention NEFT/Transaction Number ____________________________ Date __________ & Amount __________.