



USLA

United Sri Lanka Association Incorporated

Est. 1983

APPLICATION FOR MEMBERSHIP

(Fees: Joining Year \$10/=; 2nd Year onwards : Family \$25/= Seniors/Individuals \$15/=)

* **Mandatory Information** (Others are " good to have " information)

	MAIN APPLICANT	SPOUSE
SURNAME *		
FIRST / PREFERRED NAME *		
DATE OF BIRTH		
PROFESSION		
EMPLOYER		
MOBILE PHONE NUMBER		
LAND PHONE NUMBER *		
E-MAIL ADDRESS *		
SPECIAL INTERESTS		
VOLUNTEER SERVICES OFFERED		
YEAR ARRIVED IN NZ / WGTN		
ADDRESS *		
CHILD/REN	Name :	DoB :
	Name :	DoB :
	Name :	DoB :

My family / I wish to apply for USLA membership & forward this application for the approval of USLA Management Committee. We also hereby agree to abide by the constitution of the association. All information to be treated confidentially and used exclusively for USLA related matters.

.....
Date

.....
Main Applicant

(Please hand over to any MC member or post to PO Box 4179 Wellington with your 1st year subs. of \$10.00)

FOR OFFICE USE ONLY

MC Decision : Date :

Membership Fee : \$ Receipt No :

Membership Category : Number :

Secretary - USLA

Treasurer - USLA