

THE SRILANKAN FRIENDSHIP ASSOCIATION OF SOUTH INDIA



BUSINESS MEMBERSHIP FORM

Affix
Passport
Size
Photograph

Business Name		
Nature of Business	<input type="radio"/> Company <input type="radio"/> LLP <input type="radio"/> Society <input type="radio"/> Firm <input type="radio"/> Others	
Date of Incorporation (DD/MM/YYYY)		
Registered Office Address		
Contact Number	Landline - Mobile -	WhatsApp -
E-mail	Official -	
Representative 1	Name	
	Date of Birth	
	Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others
	Designation	
	E-mail	
	Contact Number	
Representative 2	Name	
	Date of Birth	
	Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others
	Designation	
	E-mail	
	Contact Number	

Representative 3	Name	
	Date of Birth	
	Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others
	Designation	
	E-mail	
	Contact Number	

We hereby declare that all the information given by us in this application is true and correct to the best of our knowledge and belief.

We also declare that the nature of connection with Sri Lanka is by virtue of

Origin
 Ancestral
 Trade / Employment
 Education
 Spouse is a SriLankan

Signature :

Referred By :

Contact Number :

Remarks :

- One time Enrolment / Registration Fee Rs 5,000/- to be paid along with this form.
- Membership Fee of Rs 3,000/- to be paid yearly.
- All applicants are required to provide at least one ID Proof
- Membership application will be submitted to the Executive Committee for review and approval, shall be in accordance with the Memorandum and Bye-laws of the Society.

OFFICIAL USE ONLY

Date of Receipt of Membership Application	
Entrance Fee Received :	
Membership Fee Received :	
Mode of Payment : Cash / Cheque / Bank Transfer Cheque Number / UTR No.	Receipt Number : Dated :
Proposed By :	Seconded By :
Approved By :	Approved By :
Date of Enrolment :	Membership No.: SLFA /.....

Remarks :