



தமிழ் முத்த பிரசைகள் சங்கம் (நி.ச.வே.) பதிவு
TAMIL SENIOR CITIZENS' ASSOCIATION (NSW) Inc.
REGISTERED (INCORPORATION) No. Y 13140-10 ABN 13 876 151 989

APPLICATION FOR ASSOCIATE MEMBERSHIP

Title	First Name	Middle Name (if any)	Last Name (Surname)	
Address:	Number & Street	Suburb	State	Post Code
Date of Birth:	Tel. No.:	Mobile No.:	Email :-	
Passport No. (attach copy of photo page)	Date of Arrival in Australia			
Visa category (attach copy of visa page/ document)	Visa expiry date :			
<p>I hereby apply to be enrolled as an Associate Member of the Tamil Senior Citizens' Association (NSW) Inc. and agree to be bound by the rules of the Association at all times. I also declare that the information given by me above and the documents relied on are true and correct. If any of the matters referred to above is found to be incorrect, my membership may be terminated and I will have no claim against the Association. I enclose my annual membership fee of \$20.00 for the year ending 30th June 20..... .</p> <p>..... (Applicant's Signature) (Date)</p>				
<p>PROPOSER</p> <p>I,being a member of the Association (Membership No.:) nominate the applicant who is personally known to me, for Associate Membership of the Association.</p> <p>..... (Signature of proposer) (Date)</p>				
<p>SECONDER</p> <p>I,being a member of the Association (Membership No.:) second the nomination of the applicant, who is personally known to me, for Associate Membership of the Association.</p> <p>..... (Signature of seconder) (Date)</p>				
<p>(For Office Use)</p> <p>Receipt No.:..... Date of approval:..... Membership No.....</p> <p>..... Treasurer Date Secretary Date</p>				