



APPLICATION FOR MEMBERSHIP

KERALA HINDU SAMAJAM INC

Applicant's Name

Family Members

- 1
- 2
- 3
- 4

Address

NoStreet.....Suburb.....Post code.....

Telephone: HomeMob.....Work.....

Email

Contact Details (India)

Address

.....

.....

Tel

PROPOSED:

Name

Signature:

Date:

SECONDED:

Name

Signature:

Date:

If my application is accepted, I agree to be bound by the rules of the Association.

Signature:

Date: