



Membership Application Form

TAMIL SENIOR CITIZENS FELLOWSHIP (VIC) INC.

Inaugurated: 11.10.1987 Registered No: A00191561 ABN: 3690732292

Postal address: P.O. BOX 5063, Clayton, VIC. 3168

CONDITIONS:- Membership is open to Tamil Senior Citizens and their Spouses who live in Victoria; Age Limit of Males and Females 55 years & over; Proposer and Seconder must be current financial members in the T.S.C.F.; An enrolment fee of \$10.00 to be sent along with application & An annual Subscription of \$ 20.00 being payable immediately on approval; Cheques to be made payable to: "TAMIL SENIOR CITIZENS FELLOWSHIP (VIC) INC."; Acceptance to Membership is subject to the approval by the Committee of Management and their decision will be notified to the Applicant as early as possible.

Family Name: Dr. / Mr. / Mrs. / Ms. _____

Given Name /s: _____ Date of birth: _____

Address: _____

Post Code: _____ E- Mail: _____

H- Phone No: _____ Mob-Phone: _____

Prior Experience (Work or Any): _____

Proposed by: _____ Signature: _____

Proposer's Address: _____

Seconderd by: _____ Signature: _____

Seconder's Address: _____

Name of Next of Kin: _____

Next of Kin's Contacts Phone No: _____

Do you have objections to including your photographs in our publications: YES / NO

I agree to abide by the rules and regulations of the Tamil Senior Citizens Fellowship (Vic) Inc.

Signature of the Applicant: _____ Date: _____

For T.S.C.F. use only:

Enrolment Receipt No: _____ Date: _____

Tabled at Committee Meeting on: _____

Approved or Not Approved: _____