ST SEBASTIAN'S COLLEGE – MORATUWA

OLD BOYS' ASSOCIATION

MEMBERSHIP APPLICATION FORM

Please enroll me as a Life Member of the Association

- Name in full (Please underline common name and Surname)

- Address (Residential)

- Date of Birth (DD/MM/YYYY)

- NIC

- Telephone (Residence)

- Telephone (Other)

- Mobile 1

- Mobile 2

- Personal Email Address

- Working Industry

- Designation

- Organization

- Business Address

- Telephone

- Fax

- Official Email Address

- College Admission No

- Stay at College (Year From - To)

- Professional Qualifications (if any) _____

_____

_____

Photocopy of College Leaving Certificate is attached: Yes / No

Life Membership Fees of Rs. 500/- is enclosed in CASH / CHEQUE No:

Date

Signature

INTRODUCED BY Name _____ Member No _____

Date _____ Signature _____

OFFICIAL USE

Checked | MEMBER #

Date Tabled _____ Hon. Gen Secretary _____

Receipt No _____ Date Issued _____ Treasurer _____