

**l'Association Sri Lanka-Canada de Montréal**

(No. Matricule au Québec: 1144158095)



**Sri Lanka-Canada Association of Montreal**

(Quebec Registration No.: 1144158095)

**MEMBERSHIP APPLICATION / RENEWAL FORM**

**Please use Block Letters (wherever possible) to fill this form**

(1) \_\_\_\_\_  
 Title Family Name Other Names / Initials

**Telephone:-** \_\_\_\_\_  
 Home Office Extension

**E-Mail:-** \_\_\_\_\_

(2) \_\_\_\_\_  
 Title Family Name Other Names / Initials

**Telephone:-** \_\_\_\_\_  
 Home Office Extension

**E-Mail:-** \_\_\_\_\_

**Address:-** \_\_\_\_\_  
 Number Street Apartment  
 \_\_\_\_\_  
 City Province Postal Code

**Children**

(1) \_\_\_\_\_  
 Name / Initials M / F Date of Birth:- year month day  
 E-Mail \_\_\_\_\_

(2) \_\_\_\_\_  
 Name / Initials M / F Date of Birth:- year month day  
 E-Mail \_\_\_\_\_

(3) \_\_\_\_\_  
 Name / Initials M / F Date of Birth:- year month day  
 E-Mail \_\_\_\_\_

**Adults**

\_\_\_\_\_  
 Signature Date: year month day

Amount Paid \$ \_\_\_\_\_ Check  Cash  Please remit Checks in favor of "SLCAM"

Membership Fees: Adults \$ 10 each; add \$2 to include all children under 25 years, if full students; Date of birth of each child is required  
 Mailing address: Director of Membership SLCAM, P.O. Box 261, Pointe-Claire, Quebec, H9R 4N9