

BRENT INDIAN ASSOCIATION APPLICATION FORM FOR MEMBERSHIP

Please enrol me as a member of B.I.A.

I declare that:

1. I am a Resident/Council Tax payer in the London Borough of Brent
2. I agree with the aims and objects of the Brent Indian Association and undertake to observe and be bound by the Constitution and Rules of the Association from time to time.
3. The voting rights shall be vested in the Brent Resident Life members, Full members and representative corporate members only.
4. I enclose subscription for the sum of:

	BRENT RESIDENT	NON-RESIDENT
• LIFE MEMBERSHIP FEE	£100.00	£120.00
• ANNUAL FULL MEMBERSHIP FEE	£10.00	£15.00
• ANNUAL JUNIOR MEMBERSHIP FEE	£2.00	£4.00

TITLE (MR/MRS/MISS): _____ **AGE:** _____ **YEARS**

SURNAME: _____

FIRST NAME: _____

FULL ADDRESS: _____

_____ **POST CODE** _____

PLACE IN INDIA: _____

TELEPHONE NO. _____ **(RESIDENT)** _____ **(WORK)**

OCCUPATION: _____

Yours faithfully

Signature

Date: _____

FEE IS NOT REFUNDABLE

FOR OFFICE USE ONLY

Amount Received: _____ for the Year: _____ Date _____

Checked by: _____ Approval Signature: _____

Receipt Number: _____ Date: _____