

APPLICATION FOR GENERAL MEMBERSHIP		
UNIVERSITY OF COLOMBO ALUMNI ASSOCIATION OF NSW INC.		
APPLICANT		
I,		
of		
hereby apply to become a member of the abovenamed incorporated association. In the event of my admission as a member, I agree to be bound by the constitution of the association for the time being in force.		
Signature of Applicant:		Date:
PROPOSED BY		
I,		
a member of the association, nominate the applicant for membership of the association.		
Signature of Proposer:		Date:
SECONDED BY		
I,		
a member of the association, second the applicant for membership of the association.		
Signature of Seconder:		Date:
MEMBER DETAILS		
APPLICANT PERSONAL INFORMATION		
Title:		
Name:		
Current address:		
City:	State:	Postal Code:
Phone (home):	Phone (work):	Mobile:
E-mail:		
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		
EMPLOYMENT INFORMATION (OPTIONAL)		
Occupation:		
Employer/Address:		
City:	State:	Postal Code:
Position:		
UOC INFORMATION		
Faculty:		
Year of commencement:		
Year of Graduation:		