

Family Relief Scheme of St. Gregorios Indian Orthodox Maha Edavaka

Kuwait

MEMBERSHIP APPLICATION FORM

Name in Full (Block Letters)..... Reg. No.....

Name of Husband (Block Letters)..... Reg. No.....

(Applicable only to depended member)

Passport Number.....Date Of Birth.....

Prayer Group / Area of residence :Tel. No.....

Office Address

..... Tel. No.....

Address in India

..... Tel. No.....

Email ID (official)(personal)

Home parish

Nominees Name and Address Relationship Benefit payable

(1)

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(2)

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I do hereby declare that I have read, understood and agree with the by-laws of the family relief scheme and also certify that the details furnished above are true and correct.

.....

(Signature of the Vicar & Date)

.....

(Signature of the applicant & Date)

I hereby declare that I decline from the benefit of this scheme and the purpose of my membership is only to help my fellow members.

Endorsed by

(Signature of Vicar of the parish & Date)

.....

(Signature of the member & Date)

For Official Use Only

Date Received.....Date Admitted..... Accepted/Rejected.....

If rejected, reason for rejection:.....

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(Signature of the vicar)

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(Signature of the secretary)