

MINHAJ ASIATISK KULTURFÖRENING

MEMBERSHIP FORM

APPLICANT INFORMATION

Name:

Person no:

Email:

Mobile:

Current address:

Post no:

City:

Country: SWEDEN

SPOUSE INFORMATION

Name:

Person no:

Email:

Mobile no:

CHILDREN (ONLY UNDER 18)

Name

Date of Birth

Phone

Name	Date of Birth	Phone

SIGNATURES

I authorize the verification of the information provided on this form.

Information for children under 18 (Common application) Family members under 18 are included under the same membership number of registered careers and only need to fill in your name and birth date. Family members over 18 years of age must complete a separate application for membership. They then assigned its own membership number and are obliged to pay the membership fee and provide full personal details.)

Membership Fees is 50 kr/year for each person.

Signature of Member:

Date:

For official use only

Applicant Membership no.

Spouse Membership no.

