



साझा नेपाली समाज यूके

SAJHA NEPALI SAMAJ UK

MEMBERSHIP FORM

PERSONAL DETAIL

Full Name _____

Address Line 1 _____

Address Line 2 _____

Post Code _____

Email _____

Membership No. _____ *(If membership application is renewable)*

ADDITIONAL DETAILS

Membership Type _____ Individual / Organization _____

Affiliated Organization _____ (if any) _____

Any Other Info _____

OFFICIAL USE ONLY

Form received by _____ Membership Fee _____ Date _____

Membership Fee _____ Membership No. _____