



# WORLD MALAYALEE COUNCIL, INC.



(Completed form to be sent to the Province President/Secretary)

## MEMBERSHIP APPLICATION

I wish to become a member of the World Malayalee Council and I submit this application for your favorable consideration. I have studied the bylaws of the WMC and I find myself fully qualified for its membership. I also affirm that I will abide by all the provisions of the bylaws and undertake the pledge as under.

**The prescribed fee for my membership is enclosed.**

**Full Name** : \_\_\_\_\_

Professional/Educational background: \_\_\_\_\_

Date of birth : (Optional) : \_\_\_\_/\_\_\_\_/\_\_\_\_

*In USA*

*In India*

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone : \_\_\_\_\_ E-mail: \_\_\_\_\_

### Family details

Spouse : \_\_\_\_\_ Birthday [MM/DD] \_\_\_\_/\_\_\_\_

Children : \_\_\_\_\_ Age \_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_ M/F: \_\_\_\_

\_\_\_\_\_ Age \_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_ M/F: \_\_\_\_

\_\_\_\_\_ Age \_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_ M/F: \_\_\_\_

\_\_\_\_\_ Age \_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_ M/F: \_\_\_\_

Signature of the Applicant: \_\_\_\_\_

**Recommended by: Name** : .....

Address : .....

.....

Telephone Number : .....

E-mail address : .....

Membership Fee : \$..... for the period from .....to.....

Check No:.....(Drawn in favor of *World Malayalee Council* ) [Annual membership \$25 and Life Member: \$250,Biennial fee]

### OFFICE USE ONLY

Checked/Verified eligibility / background of the candidate and found acceptable. An amount of \$..... has been received towards the membership for the period from .....to.....

Mr./Ms/Miss/Dr..... is admitted as a Member of WMC in the Dallas Province of America Region of WMC.

Signature of the President/Secretary of Province : \_\_\_\_\_ Date:...../...../.....