**MEMBER ENROLLMENT FORM**

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| **MEMBER DETAILS** | | | |
| 1. Full Name (Block Letters) |  | | |
| 1. Father’s / Spouse’s Name |  | | |
| 1. Date of Birth | Date \_\_\_ Month \_\_\_\_ Year \_\_\_\_\_ | 1. Gender | 🞎 Male 🞎 Female |
| 1. QID No. |  | 1. Passport No. |  |
| 1. Profession |  | | |
| 1. Sponsor / Company Name |  | | |
| 1. Business / Office Address (in Qatar) |  | | |
| 1. Residence Address (in Qatar) |  | | |
| 1. Permanent Address (in India) |  | | |
| 1. Email ID |  | | |
| 1. Contact (Mobile Number) |  | 1. Contact (Office) |  |
| 1. Contact (Residence) |  | 1. Contact (Fax) |  |
| 1. Number of Years in Qatar |  | | |
| 1. Introduced By (Name & Membership No.) |  | | |

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| **FAMILY DETAILS** | | | | | |
| Name | Membership No. | Relationship | Date of Birth | Contact No. | Email ID |
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| I confirm that the above details are correct. I will abide by the Rules and Regulations of KSQ & Indian Cultural Centre. | | | |
| **Date** |  | **Signature** |  |

Note: Membership Fee of QR 150/- is Non-Refundable