# Affiliation Request

I.....DOB...../...../.....

Contact number.....

Address.....
.....
.....

submit my request to affiliate to the **Socio-Cultural Syriac Incorporated Association** membership and I undertake to abide by the rules of the Association which I have read and work to achieve the objectives of the Association for which it was established.

Names of other family members requesting the membership:

1.....DOB.....

2.....DOB.....

3.....DOB.....

4.....DOB.....

5.....DOB.....

Main Applicant's Name .....

Signature.....Date.....

Committee Decision.....(For Association only)