

SYDNEY KNANAYA CATHOLIC ASSOCIATION

Incorporation # INC9896587 www.sydneyknanayacatholics.com

SKCA Membership Application form

Date:	Place:
Parish in India:	
Father's Parish :	Mother's Parish:
Name:	
Street:	
Suburb:	
Post Code:	
Phone:	
Email:	
I wish to apply for membership of Sydney Knanaya Catholic Association (SKCA).	
☐ I have read and accept the terms and conditions for membership addressed in SKCA Bylaw.	

□ I understand that I will be eligible for SKCA membership as per bylaw requirements(to be a member the individual have to be Knanaya by birth and deed (janmam kondum, karmam kondum))

 \Box I am giving permission to SKCA to use my personal information such as email, phone number and photos.

□ I have agreed to pay a one time membership fee (A\$25)(Sydney Knanaya Catholic Association, BSB: 062 322, A/C: 1040 9544, Description: Your name membership)

□ I am giving permission to SKCA to verify Knanaya Identity if required.

Signature of Applicant:

Note: Please send the form and evidence of membership fee to <u>execom.sydkna@gmail.com</u> or submit a copy to SKCA executive committee.