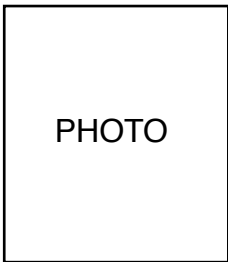




The India Association Hong Kong

P.O. Box No. T.S.T. 96625 Kowloon
www.IndiaAssociationHK.com

Member of



LIFE / ASSOCIATE LIFE MEMBERSHIP APPLICATION FORM

I, the undersigned, apply to become a Life Member* Associate Life Member** of THE INDIA ASSOCIATION HONG KONG and if admitted, I agree to abide by all the rules, regulations, bylaws and other provisions of the Association, now in force or any future additions, alterations or amendments made there to.

Name:		
Date of Birth:	Nationality:	Sex:
Residence Address:		
Res. Phone:	Res. E-mail:	Res. Fax:
EMPLOYMENT INFORMATION		
Company Name:		
Office Address:		
Phone:	E-mail:	Fax:
Occupation:		

Preferred Mailing Address Residence Business

I enclosed the amount of HK\$ 2,000.00 being the subscription for Life Membership / Associate Life Membership.

Signature of Applicant:	Date:
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* Life Members - Only Life Members shall be entitled to vote at General Meetings and be entitled to be elected Officers and or members of the Committee of the Association. Only Indians of the age of 21 years and over shall be admitted as Life Members.

** Associate Life Members - Any other persons not of Indian origin of the age of 21 years and over can apply as Associate Life Members. Associate Life Members shall not be entitled to vote at General Meetings and shall not be entitled to be elected Officers or members of the Committee of the Association.

India Association Use Only	
Proposed By: (Name in Capitals)	Signature:
Life Membership No:	Associate Life Membership No: