



SHRI KANAGA THURKKAI AMMAN (HINDU) TEMPLE TRUST

5 CHAPEL ROAD, LONDON, W13 9AE - Charity No: 1014409

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Email: info@ammanealing.com

MEMBERSHIP APPLICATION FORM

Please fill in **BLOCK LETTERS** and Tick the appropriate boxes.

Membership Type	<input type="checkbox"/> LIFE <input type="checkbox"/> ORDINARY
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr
Surname	
First Name	
Other Name	
Telephone Number	
Email-Id	
Address	
Flat No & Street1
Street2
Town
County
Postal Code
Any form of ID No. e.g.: Bank or DSS book or Driving License	_____
Amount Paid	£ _____
Payment Method	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Bank Transfer
SKTAT Receipt No	_____
<i>SKTAT membership bank details:</i>	Barclays Bank, Sort code: 20-37-60 A/C No.60844268 A/C Name: Shri Kanagathurkkai Amman (Hindu) Temple Trust (UK)
<u>conditions for membership as follows:-</u>	
<u>Ordinary members :</u> Annual fee of £36 to be paid preferably by standing order by 30 th of October each year	
<u>Life members:</u> Full payment of £504 can be paid by one payment or 3 equal instalments annually preferably by standing order by 30 th of October each year and the full payment should be paid with in three years of the commencement of the membership.	

I do hereby declare that I will abide by the constitution and bye-laws of Shri Kanagathurkkai Amman Temple, I understand that it is my responsibility to maintain the subscription. I also understand that my eligibility to attend/participate in the meetings is based on the payment of the annual subscription before 30th of December in the preceding year.

Signature of the Applicant: Date:.... /.... /.....

<u>Office use:</u> Date of Commencement (DD / MM / YYYY) : ... /... /.....	Membership Number:
Checked by	Date: ... / ... /
(Membership Committee Member)	
Signature of the Secretary:	Date: ... / ... /