



Passport size

White
Background

SLLS MEMBERSHIP APPLICATION FORM

1. NAME IN FULL : _____
2. CARD NAME : _____
3. NIC / PASSPORT NO : _____
4. MAILING ADDRESS : _____
5. CONTACT NO : _____
6. E - MAIL ADDRESS : _____
7. BRONZE/SILVER REGISTERED NO : _____
8. DATE OF ISSUE : _____
9. DESIGNATION : _____
10. DISTRICT/COUNTRY : _____
11. SIGNATURE OF APPLICANT : _____

FOR OFFICE USE ONLY

APPROVED BY:

.....
PRESIDENT

.....
SECRETARY GENERAL

- A. CARD NO : _____
- B. DATE OF ISSUE : _____
- C. SIGNATURE OF ISSUER : _____
- D. SIGNATURE OF THE RECIPIENT : _____