

SRI LANKA GERMAN TECHNICAL TRAINING INSTITUTE OLD BOYS' ASSOCIATION OF AUSTRALIA INC.

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Family Membership (FM) Application Form

1. Relative General Member's Name	
2. Relative General Member's Membership Number	
Family Membership Applicant Details	
3. Family Name	
4. Given Name	
5. House No & Street	
6. Suburb Post Cod	le
7. Home Phone	Phone No
8. E-mail Address	
9. Provide copy of any one of the following identifications	
(1) Copy of passport (2) Copy of Driver license (3) Copy	of Birth Certificate
10. Relationship to the General Member	
11. An Administration fee of \$ 10.00 must be paid when lodging this application	
12. Special skills	
13. Occupation (If you are a student, please specify year level / Uni year etc.)	
14. Declaration	
I declare that information provided above is true and accurate. If I receive the above mentioned Family	
Membership, I will be honest to the Association, and to all members. Also, I will obey the	
SLGTTIOBA Association Constitution and Policies.	
14 (1). Signature of Applicant	Date
14 (2). Signature of the General Member	
Official use only	
I have checked all requirements according to SLGTTIOBA constitution and policies. I have sent a	
letter to the applicant. Also, I have given a membership number, and recorded details of the applicant	
in the register. Membership number issued:	
Signature of Socretary:	