

BHUTANESE AUSTRALIAN ASSOCIATION OF SOUTH AUSTRALIA INC.

PO Box 785, Prospect SA 5082

MEMBERSHIP APPLICATION FORM

Personal Details			
First Name	Middle Name	Last Name	DOB (DD/MM/YYYY)
Gender <input type="radio"/> Male <input type="radio"/> Female	Phone Number	Mobile	Email Address*
Address			
Unit/Flat/Apartment/House #	Street Address	Suburb	State/ Zip
Mailing Address			
Unit/Flat/Apartment/House #	Street Address	Suburb	State/ Zip
Address in Bhutan			
Village/Town	Gewog/Dungkhag	Dzongkhag	House/Thram # Exile Status:

Signing this membership application form, I make an informed pledge to abide by the constitution, resolutions, rules and regulations of the Association, and will act in the furtherance of fulfilling the aims and objectives of the Association by complying with its decision and supporting and participating in its programs and activities.

Name: (PRINT): _____ Signature: _____ Date: ___/___/___

Nominated and Supported By:

Accepted and Approved By:

Official Use Only		
Application Received Date: ___/___/___	Membership Granted/Renewed on Date: ___/___/___	Fee Received \$ _____
File # -----	Membership # -----	Membership Expires on Date: ___/___/___

The information collected through this form shall be strictly used for BASA official purpose and shall not be provided to third party without prior consent of the applicant.

* Email shall be used for future communication.