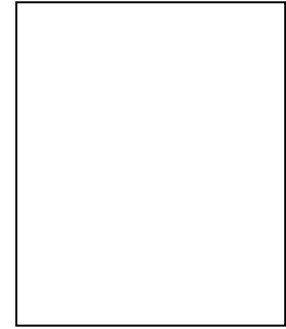




# Indian Cultural Centre

Under the aegis of the Embassy of India  
Doha, Qatar



## LIFE MEMBERSHIP FORM

1. Full Name (Block Letters) : .....
2. Father's Name : .....
3. Passport No. : .....
4. QID No. : .....
5. Profession : .....
6. Office/Business : .....
- Post Box No.....
7. Residence Address in Doha : .....
- Post Box No.....
8. Contact Numbers : Office.....Res.....
- Fax.....Mob.....
- E-mail.....
9. Permanent Address in India : .....
- .....Tel.....

### 10. Name and Details of Family Members:

Sl.No.	Name	Relationship	Date of Birth	Passport No.

I confirm that I will abide by the Rules and Regulations of the Indian Cultural Centre.

Date:.....

\_\_\_\_\_

Signature

NB:-

- i) The Life Membership Fees will be QR. 500/- per person NON-REFUNDABLE.
- ii) Please attach photocopy of your passport including the page of Residence permit with two photographs.

### FOR OFFICIAL USE

Receipt No:.....

Date:.....

Membership No. LM:.....

\_\_\_\_\_

Office Admin

\_\_\_\_\_

President

\_\_\_\_\_

Head of Membership