

Mar Thoma Church in Oman

P.O. Box : 2183, Postal Code: 112, Ruwi
Tele: 24702437 / 24750835. Fax: 24751069

REQUEST FOR MEMBERSHIP

Date

Name :
P.B. No. : Code: Flat No. House No.
Post Office : Way No. Prayer Area :
Tel. : (R) Area Landmark :
Company : Qualification :
Tel. (O) Profession :

Date of Birth : Sex : Male / Female :
Date of Joining :
Marital Status : S M Date of Marriage :

Home Address :
Home Parish : Home Tel. :

FAMILY DETAILS

Name :	Date of Birth	Relation	In Oman Y / NO
1.
2.
3.
4.
5.
6.

Family Benefit Scheme : YES / NO Subscription Promised : R.O. P.M / Annum

Date of Certificate from Home Parish

I do understand that production of membership certificate from my home parish is a requirement.

Signature of Applicant

CERTIFICATE FROM HOME PARISH

I hereby certify that the details of the applicant and his/her family members as given above are correct according to the entries of Edavaka Register kept at this parish and that there is no objection to their being enrolled as members of that parish.

Vicar's Name and Signature & Seal of home parish :

(For Office use only)

Approved for Enrollment as Member