

MAR THOMA CHURCH IN OMAN

P.O. Box : 2183, Ruwi, P.C. : 112, Sultanate of Oman
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FAMILY BENEFIT SCHEME

Membership Form

Church Mem. No.

Serial No. :

1. Name in Full
2. Name of Father
3. Address in India
4. Home Parish
5. Address in Oman : P.O. Box : P.C. :
6. Name of Company / Sponsor
7. Telephone No: Office Res. GSM E-mail ID
8. Present Location of Residence : Way No. House No. Flat No. Land Mark
9. Date of Birth Marital Status

10. Nominee (s)

Name & Address	Relationship	% of Benefit Payable
1.
2.
3.

For the purpose of the benefit disbursement, my nominees are to be treated " in the order of preference as above for the benefit / as eligible for receiving the benefit according to the percentage indicated against each"

Please enroll me as a member of the "Family Benefit Scheme, I confirm that I agree to abide by the terms of constitution of the Scheme.

Signature :

Date :

Name :

(For Office use)

Approved Not approved

Signature of Vicar

Remarks :

Date :