



ST. BENEDICT'S COLLEGE, COLOMBO 13

WELFARE SOCIETY

MEMBERSHIP APPLICATION FOR PAST PUPILS



- 1. SURNAME : _____
- 2. OTHER NAMES : _____
- 3. HOME ADDRESS : _____

- 4. OFFICE ADDRESS : _____

- 5. E MAIL ADDRESS : _____
- 6. TELEPHONE : a. Mobile : _____
b. Home : _____
c. Office : _____
- 7. NIC NUMBER : _____

- 8. **CONFIRMATION OF PAST PUPILS** - (One of the following should be produced as proof)
 - a. Copy of OLD BOYS UNION (OBU) Membership Card
 - b. _____ (OBU Membership Number) - Certified by the Secretary.
I, _____ Secretary of the OBU confirm above Membership Number.

Signature

OBU Seal

- c. Copy of School Leaving Certificate.
- d. Letter from Past Director confirming that you were a student at St. Benedict's College from Year _____ to Year _____ .
- e. Any other Acceptable Original School Certificate/Document to prove you are a past pupil.

I, enclose herewith Rs. _____ being Membership Fees. [Cash / Cheque No: _____]

DATE

SIGNATURE

FOR OFFICE USE ONLY

- 1. Application Accepted / Rejected - Meeting Held on _____
- 2. Membership No: _____ Receipt No: _____

IF REJECTED

- 3. Reason for Rejection: _____
- 4. Rejection informed in Writing on _____

SECRETARY
DATE _____

TREASURER
DATE _____