







Individual Membership Application - FORM A

This application form is to apply for a Membership of GAA London, either as a Patron, Life, Associate or a Social Member. The membership covers only the <u>individual</u> applying to become a paid-up registered member. The membership does **NOT** cover their spouse or children over 18 yrs.

Membership of GAA London is subject to approval by the Management Committee. A Membership Card will also be issued upon approval.

Please use **black ink** and **CAPITAL** letters only.

Section 1: Applicant's Details

Title: Mr	/ Mrs / Miss / Other				
First Nan	me(s): Surname:				
DoB (MN	//YYYY): (Month &	Year only)			
Address:					
			APPLIC	^ΔΝΤ	
Post Code:				7 (1 T EIC/ ((V)	
Home Te	el:	РНОТО			
Mobile T	el:		35mm(W) x	45mm(H)	
Email Address:					
Sectio	n 2: Family Details				
Spouse's	Full Name (if applicable):				
Applican	t's Father's Full Name:	City/Town of	Birth:		
Applicant's Mother's Full Name: City/Tow			n of Birth:		
	clude your <u>ancestral</u> home town in India and o nily lineage. This is normally the same as your fa				
Origin in	India (Town/City) :	Origin in Other Country:			
Please fi	II this section in if you have any children aged	18 yrs or Under.			
CHILD	FULL NAME		DoB (MMYYYY)	GENDER	
1					
2					
3					
	ICIAL USE iMA 4/01/2024		ONLY		





Gujarati Arya Association London UK registered Charity No. 265170 www.gaalondon.org.uk info@gaalondon.org.uk



Section 3: Fees & Payments

Patron, Life and Associate membership fees are one-off payments, which are valid for the entire duration of a

person's lifetime (including the 'YOUNG London's Constitution.	3 ADULT' Memberships	s), subject to the Terms & Conditions of GAA
I would like to apply for the following type MEMBERSHIP TYPE	e of Individual Members STANDARD FEE	ship (please tick one box only): YOUNG ADULT FEE (18 -21 yrs ONLY)
Patron Life Associate (available to spouse only) Social	£225 £51 £35 £25	£101 £25 £17
Payment Methods (please tick one box or	ıly):	
CHEQUE: Please make cheque pay BACS: Name: GAA London, Ac	•	ort Code: 20-72-33, Ref: (use name & surname)
Section 4: Reference		
Please provide a name & address of an ex (can be a family member, friend, colleagu	_	· · · · · · · · · · · · · · · · · · ·
Referee's Full Name:		Contact No:
Address Details:		
Section 5: Declaration		
I hereby apply for a GAA London Member personal details on their database:	ship. By signing this for	m, I give GAA London consent to hold my
Signature :	Da	ate:
The information you have provided will be hell If you would like to see the information we ho	<u>-</u>	ndon database to administrate your membership. act us with your personal identification.
Please send the completed form, toge	ther with a colour pas	ssport sized image & proof of payment to:
EMAIL: secretary@gaalondon.org.uk POST: Secretary, GAA London, Kentor		uality electronic photos). elds, Woodcock Hill, Kenton, Middx HA3 OPQ
Any Additional Information:		