

"SISU ATH-WELA" Contributions

Name :

Address :

office:

home:

Contact Tel.:

office:

home:

E-mail:

Membership Number:

Frequency of payment (Please tick-off)

Monthly (Rs. 500/-) ☐

Bi-monthly (Rs. 1000/-) ☐

Quarterly (Rs. 2000/-) ☐

Half Yearly (Rs. 3000/-) ☐

Yearly (Rs. 6000/-) ☐

Signature