



St. Stephen's Martha Mariam Vanitha Samajam, Kuwait

Membership Form

1. Full Name: _____
2. Date of Birth: _____
3. Date of Wedding: _____
4. Prayer group: _____
5. Name of Spouse: _____
6. Church Reg. No.: _____
7. Email: _____
8. Home Parish: _____
9. Permanent Address: _____
10. Residential Address: Area: _____ Building No: _____
 Floor: _____ Flat No.: _____
11. Telephone #s: Residence: _____ Mobile: _____

.....
(Date)

.....
(Applicant Signature)

(Note: Membership fee of KD 1/- should be submitted with each filled registration form.)

FOR OFFICE USE ONLY

Registration No: _____

Fees Paid: Yes/No: _____

.....
(Secretary Signature)

.....
(Vicar/President Signature)