



Ontario Sikhs & Gurdwara Council

Non – Profitable, Religious, Social and Cultural Umbrella Body of Sikhs and Gurdwara's
905 Middlefield Rd Scarborough ON M1V 4X1
TEL: 416-299-4800 Fax: 416-299-9737

APPLICATION FOR MEMBERSHIP (Individual)

Two (2) Years Single Membership Fee \$ 100/-

APPLICANT'S SURNAME Mr./ Mrs. / Miss _____

GIVEN / MIDDLE NAME _____

ADDRESS _____

POSTAL CODE _____

TEL : RESIDENCE _____ CELL PHONE _____

E-MAIL ADDRESS _____

2. APPLICANT'S DECLARATION

I hereby the undersigned make an application for the Membership to the Ontario Sikhs and Gurdwara Council. I agree to comply with the Constitution and commit my full trust and loyalty to the O.S.G.C. I understand that failure to do so can result in disqualification of my membership. I also understand that my m/ship application is subject to screening by the scrutinizing committee, its decision is final & binding and I will be advised accordingly.

Signature (Applicant) _____ Date _____

This part to be completed by any one of the member of O.S.G.C. in good standing.

I _____ recommend the above applicant to be accepted for membership of the O.S.G.C.. I know the applicant personally for the last _____ years.

Signature (Witness) _____ Date _____

Address; _____ Tel. No. _____

Scrutinizing Committee`s comments

Application Received (Date) ; _____

Approved / Disapproved / On hold for check

Name _____ Signature: _____ Date: _____

FOR OFFICE USE ONLY.

Amount Received \$ _____ . Receipt # _____ DATE _____

Member Ship period From _____ / _____ / _____ TO _____ / _____ / _____
Date Month Year Date Month Year

Treasurer : _____ Date : _____

Chair Person: _____ Gen. Secretary; _____ Date _____

MEMBERSHIP NUMBER