



Durham Tamil Association

P.O Box 161, Pickering, Ont., L1V 2R4

Tel : 905-428-7707

Web: www.durhamtamils.com

Email: info@durhamtamils.com

Membership Number:

Annual Fee \$

Durham Tamil Association Membership Application

Applicant Information

First Name:	Last Name:
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Home Phone:	Cell Phone:
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Current address:

Street no:	Street name:	Apt no:
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City:	Province:	Postal Code:
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E-mail:	Fax:
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Spouse Information

First Name:	Last Name:
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Family Members

	Gender:	Date of Birth:
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2.		
3.		
4.		
5.		
6.		

By participating in the Durham Tamil Association's Performances and activities. I waive and release any and all Claims for myself, heirs, executors and administrators against the Durham Tamils association. Inclusive off all sponsors. Officials and organizers of the performances and activities for injury, illness or fatal injury which may directly or indirectly result from my or my Children's participation in the performances and activities. I shall permit the free use of mine and/or my children's name(s) and picture in publicity resulting from the performance and activities. I am (my children's are) physically fit to participate in the performances and Activates. I have read and fully understand and agree with the contents of this waiver/release prior to participating in Durham Tamil Association's any performances and activities. All the information is confidential the use of DTA only.

Signature of applicant:	Date:
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Office Use Only

Payment Received By:	Date:
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Cash:	Cheque No:	Receipt No:
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-2011	-2012	-2013	-2014	-2015
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Unity is Strength