WORLD TRADITIONAL SILAMBAM SPORTS & ARTS ASSOCIATION



Head Office: No.8, Kalpalam road, M.M Complex, Goripalayam, Madurai (Tamilnadu) - 625002, INDIA Branch Office: No. 53, Jalan Batu Caves, 68 100 Batu Caves, Selangor, Kuala Lumpur, MALAYSIA

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		Membership Form		
1.	Name:			
2.	Date of birth & Age:		Photo	
3.	Blood Group:			
4.	Gender:	Male / Female / Third Gender		
5.	Parent's Name:			
6.	School / College Educational Details:			
7.	. Permanent Address with Mobile/ email id:			
8.	3. Interest / Experience in Silambam Sport / Art:			
9.	. Introducer name & Signature:			
10. Any other remarks to mention:				
11. Declaration : I declare that all statements made in this application as well as the information provided herewith are true to the best of my knowledge and belief, and I also understand that in case of misrepresentation of facts, the membership, if selected, is liable to be terminated				
	Place:	Date: Signature of the A	gnature of the Applicant	
	- For Office Use -			

- Note: 1. Kindly attach any one of the Photo Identity Card (Example Aadhar card / Driving License / Passport)
 - 2. Recent Passport size photos two
 - 3. For Indian, Membership Subscriptions will be Rs 750 (Six months), Rs 1500 (Annual) and Rs 40,000 (Life Membership): For Foreigners, Membership will be 1000 US Dollar (Life Member)
 - 4. A members will be selected only by the scrutinizing committee of WOTSSAA