



Gujarati Group of Brampton

502-30 Gillingham Drive, Suite # 558, Brampton, ON, L6X 4X7

www.gujaratigroupofbrampton.ca Email: info@gujaratigroupofbrampton.ca

Membership Application Form

Full Name: _____

Address: _____

Birth Date: _____

Profession: _____

Cell # _____

Home Phone # _____

Email: _____

Name of Spouse: _____ Birth Date: _____

Name of Kid: _____ Birth Date: _____

Name of Kid: _____ Birth Date: _____

Name of Kid: _____ Birth Date: _____

Are Your Parents / In-laws staying together? Yes / No

If Yes, would they like to Join Gujarati Group of Brampton? Yes / No

Name of Parents _____ & _____

What type of Activities / Programmes would you or family is interested to be organised by this group?



How can you help / Support this Group (GGB)?

Membership type:

Membership Fees Payment option: Cash: ☐

Cheque: ☐

Date:

Signature:

Disclaimer/Confidentiality/ Privacy:

Gujarati Group of Brampton is **Non-Profit Organization**. I am Ok to be contacted via / WhatsApp, email or phone. By Submitting this membership form, Applicant approves the right to disclose this information and sharing the same with partner organisation and/or at public domain (Organisation's website). Membership is subject to the terms and condition of organisation policy. Application will be subject to approval by Board of Directors of GGB.