## **AMBHETI GAAM OF INDIA**

www.ambhetigaam.com

## ANNUAL MEMBERSHIP APPLICATION

Applying for:	New Membership		Mei	mbership Renewal for
(Check One)				Check this Box if only submitting for the change of address/contact notification
	Annual membership:			
Application For (Check one)	Family: Single:		List my	name in Ambheti Gaam Directry Yes No
Applicant's				
Name:	(Last)	(First)		(Middle)
	(Last)	(First)		(ivildule)
Spouse's Name (If applicable)				
	(Spouse's Name)			
Address:				
	Street Apt#			
	City	State		Zip
	Phone#: ( )	-		
	Email:			
	Unmarried Children			Parents living at the same address
	Name	Age		Name
D 1 4				
Dependents Living with you				
. g ,				
Mailing Address:	Mail Application to:			
Signaturo				
Signature	(Anglicant)			(D.4.)
	(Applicant)			(Date)
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