



R.No.....

Date.....

# SACAA

## ST. ALOYSIUS COLLEGE ALUMNI ASSOCIATION®

MANGALORE - 575 003, TELEPHONE : (0824) 2953849

E-mail : sac.sacaa@gmail.com

### To MEMBERSHIP ENTROLMENT FORM

Hon.Secretary  
SACAA  
St Aloysius College  
Mangalore - 575 003

Sir,

I wish to become a life Member of St. Aloysius College Alumni Association, SACAA.

#### PERSONAL DETAILS

Full Name (in the block letters) :

MISS/MRS/MR/DR :  d  d  m  m  y  y  y  y

Date of Birth :

Year of leaving College /School :

Class in which last studied :

Present Occupation :

#### CONTACT DETAILS

Address: Office :

Residence :

Contact Number : Please list telephone numbers, fax numbers, e-mail and cellular phone numbers

Personal/Residence :

Office/Place of Work :

Cell Phone :

Email Address :

#### MEMBERSHIP CATEGORIES AND SUBSCRIPTIONS:

Alumni Residing Abroad	Rs. 1000/-
Alumni Resident in India	Rs. 500/-
Staff Members	Rs. 300/-

#Please issue Cheque/Demand Draft in favour of St Aloysius College Alumni Association, Mangalore. Out station cheques to include Rs.50/- as collection charges.  
Declaration:

I,.....hereby agree by the Constitution of the Association (SACAA) and work for its welfare.

Place:

Date:

Signature of the Applicant

