



GCKA - Greater Carolina Kerala Association
MEMBERSHIP APPLICATION & DIRECTORY ENTRY FORM

APPLICANT INFORMATION		
Name:		
Current address:		
City:	State:	ZIP Code:
Phone No:	Email Id:	

SPOUSE INFORMATION
Name:

CHILDREN INFORMATION	
Name	Name
Name	Name

DIRECTORY INFORMATION			
Do you want to publish your information in the Directory?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Do you want to publish your Email Id in the Directory?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

SIGNATURES	
I wish to join the Greater Carolina Kerala Association (GCKA) and agree to follow the Bylaws of Greater Carolina Kerala Association.	
Signature of applicant:	Date:

Please mail your completed form with payment to:

GCKA
P.O. Box 1271
Apex, NC 27502-1271

Please visit www.gcka.com for GCKA Privacy statement.