



MEMBERSHIP APPLICATION FORM

I/We hereby apply for Membership of the Society and understand the Objectives of the Society are as follows:

1. To foster social activities and friendly relations among the Scottish people and their families resident in Abu Dhabi.
2. To foster Scottish cultural activities and institutions and the celebration of Scottish anniversaries.
3. To foster relations between the Scottish Community and the citizens of Abu Dhabi.

APPLICANT'S PERSONAL DETAILS

Status: (please tick appropriate) New Member Membership Renewal

Nationality: Scottish Other: _____

Full Name: _____

Occupation: _____

Address: PO Box _____
Abu Dhabi
UAE

Mobile No.: _____ **Office No.:** _____

Email: _____ **Fax No.:** _____

Membership Type: **Annual** Dhs100 per person
 Life Dhs400 per person

Payment Method: **Cash**
 Cheque (made payable to "CASH")
 Direct Deposit
Bank details: TBA

Committee member: Are you a current committee member? Yes No
 Are you a past committee member? Yes No

 Position held _____ Year(s) _____

Signature: _____ **Date:** _____

Why would you like to join the Society?
