Form: BF /KT /24 / 01 e- Format



ST JOHN AMBULANCE BRIGADE - SRI LANKA APPLICATION FOR THE REGISTRATION OF KITTY DIVISION

_		

1. Province:			District	:		
Education Zone :						
2. Name of the School:						
3. Address of the School	:					
				TP:		
4. Date of Registration:			Tota	l No of Members	: Girls	Boys
5. Payment details: Regis	stration fe	e Rs. 110). 00 per m	ember (valid up to	31.12.2024)	
A. Registration badge :	110.00] X	=			
B. Member Certificate	80.00	x	=		Receipt No:	
C. Kitty Record Book	100.00	X =	=			
D. Kitty Cap	500.00	X [TOTAL:	
Mode of payment: Paid to	the Distric	t Officer	: by Cash / 0	Cheque / Account D	eposit – on	
6. Teacher : 1. Mr/ Mrs/ Ms				Mem N	No:	
TP WhatsApp :		E-mai	1:			
2. Mr/ Mrs/ Ms				Mem I	No:	
TP WhatsApp :		E-mai	1:			
Recommended by District C Email to: stjohnservice@		er * e forr	mat accepted	. Signature is not nece	essary. email from regi	stered email.
Paid to NHQ: by Cash / Cho *** please make sure to inform da	-	_			al: Rs	
NHQ use_– details	checked &	& correct	t.			
Date:	S	ign: NH0	Q Officer:			
Registration Approved						
Reg: Number		Wit	h effect from	:		
Commissioner			Date			
St John Ambulance Brig			•	rdiner Mawatha, Colomb tjohnsrilanka.lk 076 137 8		

Complete this form (PDF format) by typesetting (computer).

The names of Kitty members should be emailed as Microsoft Excel soft copy.

Spellings of the names should be checked by DO before sending.

No corrections will be made if the name is same as in Softcopy.

The maximum gap allowed is one month from the date of registration to accepting registration forms by NHQ. Following instructions properly & completing forms correctly will avoid delays in issuing certificates & badges.

