



The Association of Professional Sri Lankans in the UK

Membership Application

Title	Prof.(<input type="checkbox"/>)Dr.(<input type="checkbox"/>)Mrs.(<input type="checkbox"/>) Mr.(<input type="checkbox"/>) Miss(<input type="checkbox"/>) Other(<input type="checkbox"/>) Please state:		
Surname		First name	
Profession			
Address			
Post Code			
Telephone		Mobile	
E-mail		Website	
Please state the ways in which you could help the APSL further its aims			
I wish to support the objectives and strategies of The Association of Professional Sri Lankans in the UK, and hereby apply for membership.			
I will be pleased to assist in knowledge transfer programmes. [Please tick the location(s) below to state your choice]			
London (<input type="checkbox"/>) Out stations (<input type="checkbox"/>) Please specify. Sri Lanka (<input type="checkbox"/>)			
Signature _____ Date _____			
Proposed by (Name)		Signature	
Seconded by (Name)		Signature	
Please return the completed form along with a cheque for £15 (the 1 st year's membership fee) payable to Association of Professional Sri Lankans in the UK to:			
Ranjan Perera General Secretary, APSL 18 Bishopscourt Gardens Chelmsford Essex, CM2 6AZ			
Mobile 07749 801064 Home 01245 260199			
For Office use only			
Accepted: Yes / No	Membership category		
Date:			