

Pakistan Scrabble Association

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CNIC No.:	Tel.:	2.
Mobile:I	Email:	
Educational attainment:	Tel.: Email: Date of birth:	
I desire to become a member/life member of Pakistan Scrabble Association. I confirm to abide by the memorandum and rules and regulations in force and/or subsequently altered from time to time in manner authorized.		
I enclose Rsbeing my an application.	nnual/life membership subscription. Please accept my	
Dated:	Signature:	
Note: Attach photocopy of CNIC and 1 extra photograph (1 inch X 1 inch) for membership card.		
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Membership No.: R	Receipt No.: Date:	
Issued membership card: Yes No		
 Treasurer	General Secretary	