

NAME:	
Civil ID No:	
KMRM Code	

TRANSFERING FROM		TRANSFERING TO	
Kudumba Koottaima Name		Kudumba Koottaima Name	
Sector Name		Sector Name	
Area Name		Area Name	
Flat#		Flat#	
Floor#		Floor#	
Building#		Building#	
Street#		Street#	
Block#		Block#	
Area		Area	

I hereby declare that I am a Syro-Malankara faithful and member of Syro-Malankara Catholic Church. My details stated herein are true and correct to the best of my knowledge.

Applicant Signature Date

FOR THE USE OF THE SECTOR COMMITTEE					
Coordinator Signature		Secretary Signature			
FOR THE USE OF THE AREA COMMITTEE					
Area President Signature		Area Secretary Signature			
FOR THE USE OF THE CENTRAL COMMITTEE					
Spiritual Director	President	General Secretary	Treasurer		