SAURASHTRA PATEL SAMAJ OF CANADA

Please fill in this form completely and either bring it with you to a Samaj function, or mail it in to any address on this year's schedule, or give it to any current Committee member. We have ambitions of publishing a local directory of our members, so we would appreciate it if you would let the Committee know of any future changes to your information.

PLEASE PRINT CLEARLY

Last Name	First Name	Father's/Husband's Name
Street Address		
City	Province	Postal Code
Home Phone	Work/Business Phone	
E-Mail Address		
Original Town in India	Original District	
Wife's Maiden Name (before Marriage)	Do you use "Patel" as your official Family Name? ☐ YES ☐ NO	

Below, please only list immediate family members. Immediate family members include yourself, your spouse, unmarried children, unmarried siblings, and your parents if they are living with you.

First Name	Marital Status	Relationship	Date of Birth* MM/DD/YYYY	Occupation	E-Mail or Phone
		Self			

*optional

By signing below, you give consent to the Committee to publish the above information.

Your Signature _____ Date _____