



# தமிழ்ச் சங்கம் லக்சம்பர்க்

## Tamil Sangam Luxembourg

Registered Address: 75, Route d'Arlon, L-8311 Capellen, Luxembourg

[www.tamilsangam.lu](http://www.tamilsangam.lu)

[info@tamilsangam.lu](mailto:info@tamilsangam.lu)

### MEMBERSHIP APPLICATION FORM

#### Membership Plan

Family Members  
20 € / Calendar Year

Adult Individual Member  
10 € / Calendar Year

Student Member  
5 € / Calendar Year

#### Member Information:

First Name

Last Name

Date & Place of Birth

Gender

Male

Female

Nationality

Profession

Street

Post Code, City

Mobile No.

E-Mail

#### Family Information:

Spouse Name

Date of Birth

Gender

Male

Female

Child Name (#1)

Date of Birth

Gender

Male

Female

Child Name (#2)

Date of Birth

Gender

Male

Female

Child Name (#3)

Date of Birth

Gender

Male

Female

1. The minimum age for applying for the Tamil Sangam Luxembourg (TSL) membership is 18 years.
2. The application will be processed only after the remittance of the membership fee. It can be withdrawn within 14 days by sending a request to Tamil Sangam Luxembourg (TSL).
3. The Membership is non transferable.
4. The process of reviewing and deciding upon the application rests with the Board of Tamil Sangam Luxembourg (TSL).
5. Member should not represent Tamil Sangam Luxembourg (TSL) in media or any other public forum without prior approval from Board.
6. Member should not use Tamil Sangam Luxembourg (TSL) for personal or professional benefits.

I agree to the above Terms and Conditions of the Tamil Sangam Luxembourg

Payment Method:

By Cash

By Bank Transfer

If by bank transfer, please pay the membership fees to account number **IBAN LU08 0019 5155 9267 2000** Bank - BCEE, BIC code - **BCEELULL**, TAMIL SANGAM LUXEMBOURG ASBL. Please send the completed form by e-mail with copy of payment transfer to [info@tamilsangam.lu](mailto:info@tamilsangam.lu)

Date, Place

Signature

For Office use only

#### Membership Confirmation

Membership No: \_\_\_\_\_

Amount Receipt Date:

Membership Confirmed Date:

Mode of Payment:

Date, Place

Signature of Secretary /  
Treasurer: