



Old Boys' Association – De Mazenod College

Hon. President
Rev. Bro. Janaka Fonseka
De Mazenod College, Kandana.

Hon. Secretary
Captain Sujeeshwa Abeysekara
Tel : 0777353686
secretary@dmcoba.com

Hon. Treasurer
Mr. Vilan Senavirathne
Tel : 0773608283
treasurer@dmcoba.com

Office: OBA Secretariat, De Mazenod College, Kandana.
<https://www.dmcoba.com>

LIFE MEMBERSHIP APPLICATION

Please fill only using **CAPITAL BLOCK** letters

Name				<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> PHOTO (Passport Size) </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Administration</td> <td style="text-align: right;">350.00</td> </tr> <tr> <td>Membership (Life)</td> <td style="text-align: right;">10,000.00</td> </tr> <tr> <td>TOTAL (LKR)</td> <td style="text-align: right;">10,350.00</td> </tr> </table>	Administration	350.00	Membership (Life)	10,000.00	TOTAL (LKR)	10,350.00
Administration	350.00									
Membership (Life)	10,000.00									
TOTAL (LKR)	10,350.00									
Home Address										
Mobile No.		Land Line No.								
Email										
Occupation										
Workplace & Address										
Off. Telephone		National ID No.								
History at De Mazenod College				For Office Use Only						
Admission No.			Last grade attended at school <i>(Grade ..8,9,10,11,12 or 13)</i>		Checked By & Date					
Duration	YYYY	To	YYYY							
Achievements, Sports, Contributions to College as a student										
Family Details				Final Approval & date						
Spouse Name										
Child 1		DOB	DDMMYYYY	Gender M / F						
Child 2		DOB	DDMMYYYY	Gender M / F						
Child 3		DOB	DDMMYYYY	Gender M / F						
State how you intend to contribute to OBA				Membership Number						
Recommender's Name				Membership card posted / received by member						
Recommender's OBA Membership No.		Recommender's Signature								
I confirm that the details provided above are correct and request to be enrolled as a Life Member of the Old Boys' Association of De Mazenod College ("OBA"). I hereby give my consent for the OBA to collect, store and process my personal data in accordance with membership requirements.				Applicant's Signature & Date						

* Important:

1. Attach a copy of your **School Leaving Certificate** (*compulsory*) with this application.
2. Make the **payment** to "**De Mazenod College Old Boys' Association**" (**Commercial Bank – Kandana Branch, Account No. 1373590801**) and attach the payment proof (*compulsory*).
3. Send the completed application, leaving certificate copy, and payment proof by registered post to the Membership Secretary, De Mazenod College OBA, Kandana, **or** email scanned copies to membership@dmcoba.com. For any queries, contact membership@dmcoba.com.

****The OBA will not assume any responsibility for applications that do not follow the procedure outlined above.****