



Associate Member

UNITED SRI LANKAN MUSLIM ASSOCIATION OF AUSTRALIA

Membership Application Form

Please read the instructions overleaf prior to filling this form. Please type or print in block letters

1. MEMBERSHIP CATEGORY:

Family ☐

Pensioner ☐

Single ☐

Student ☒

Affiliate ☐

2. APPLICANT

Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
	FY	FELIX	YUEN

3. SPOUSE

Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:

4. HOME ADDRESS

Street Address:
[REDACTED]
Suburb:
[REDACTED]
State:
VIC
Post Code:
[REDACTED]
Telephone:
[REDACTED]
Email:
[REDACTED]

5. BUSINESS ADDRESS (OPTIONAL)

Street Address:
Suburb:
State:
Post Code:
Telephone:

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

I hereby apply for membership of USMAA. I agree to abide by the "Constitution and Rules of USMAA" and have read and understood the instructions printed overleaf.

[REDACTED]

Signature of Applicant

12/07/14
Date

Nominator has to be a Current Financial Member of USMAA

NAME OF NOMINATOR	Zean M. SINGHAWANSA
SIGNATURE	[REDACTED]
DATE	12/07/14



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1. MEMBERSHIP CATEGORY:

Family ☒

Pensioner ☐

Single ☐

Student ☐

Affiliate ☐

2. APPLICANT

Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
		Mushaib	Yoonus

3. SPOUSE

Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
		Raeesah	Yoonus

4. HOME ADDRESS

Street Address:	[Redacted]		
Suburb:	[Redacted]		
State:	Post Code:		
VIC	[Redacted]		
Telephone:	[Redacted]		
Email :	[Redacted]		

5. BUSINESS ADDRESS (OPTIONAL)

Street Address:			
Suburb:			
State:	Post Code:		
Telephone:			

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

I hereby apply for membership of USMAA. I agree to abide by the "Constitution and Rules of USMAA" and have read and understood the instructions printed overleaf.

[Redacted Signature]

Signature of Applicant

12/7/14
Date

Nominator has to be a Current Financial Member of USMAA

NAME OF NOMINATOR	Migsan Mohinudeen	
SIGNATURE	DATE	12/07/14
m. mohinudeen		



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1. MEMBERSHIP CATEGORY:

Family ☒ Pensioner ☐ Single ☐ Student ☐ Affiliate ☐

2. APPLICANT

Title: (Mr/Mrs/Miss/Dr) MR	Initials: J	First name: NAWAZ	Surname: VILCASSIM
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3. SPOUSE

Title: (Mr/Mrs/Miss/Dr) MRS	Initials: N	First name: YASMIN	Surname: VILCASSIM
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4. HOME ADDRESS

Street Address:
[REDACTED]

Suburb:
[REDACTED]

State: VIC Post Code: 3150

Telephone:
[REDACTED]

5. BUSINESS ADDRESS (OPTIONAL)

Street Address:

Suburb:

State: Post Code:

Telephone:
[REDACTED]

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

I agree to abide by the "Constitution and Rules of USMAA" and have read it.

18/2/14

Date

Member of USMAA

NAME OF NOMINATOR

SIGNATURE

DATE



UNITED SRI LANKAN MUSLIM ASSOCIATION OF AUSTRALIA

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1. MEMBERSHIP CATEGORY:

Family ☐

Pensioner ☐

Single ☐

Student ☒

Affiliate ☐

2. APPLICANT

Title: (Mr/Mrs/Miss/Dr) MISS	Initials: F.F.	First name: FARAH FATHIMA	Surname: ZIAD
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3. SPOUSE

Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
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4. HOME ADDRESS

Street Address:
[REDACTED]

Suburb: [REDACTED]

State: VIC Post Code: [REDACTED]

Telephone: [REDACTED]

Email: [REDACTED]

5. BUSINESS ADDRESS (OPTIONAL)

Street Address:

Suburb:

State: Post Code:

Telephone:

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

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[REDACTED]

Signature of Applicant

05/04/2014
Date

Nominator has to be a Current Financial Member of USMAA

NAME OF NOMINATOR	ZIAD MOHAMMED SINGHAWANSA
SIGNATURE	[REDACTED] DATE 05/04/2014



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1. MEMBERSHIP CATEGORY:

Family ☐

Pensioner ☐

Single ☐

Student ☒

Affiliate ☐

2. APPLICANT			
Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
Miss.	F.Z	ZARAH FATHIMA	ZIAD
3. SPOUSE			
Title: (Mr/Mrs/Miss/Dr)	Initials:	First name:	Surname:
4. HOME ADDRESS		5. BUSINESS ADDRESS (OPTIONAL)	
Street Address:		Street Address:	
[REDACTED]		[REDACTED]	
Suburb:		Suburb:	
[REDACTED]		[REDACTED]	
State: VIC	Post Code:	State:	Post Code:
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Telephone:		Telephone:	
[REDACTED]		[REDACTED]	
Email : [REDACTED]			

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

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[REDACTED]

Signature of Applicant

05/04/2014
Date

Nominator has to be a Current Financial Member of USMAA

NAME OF NOMINATOR	ZIAD MOHAMMED SIDGHAWANSA	
SIGNATURE	[REDACTED]	DATE 05/04/2014



New USMAA membership application via Website online form

razil1979@gmail.com <razil1979@gmail.com>
To: webmaster@usmaa.org.au, info@usmaa.org.au

19 March 2014 09:25

USMAA Membership Application request submitted on Wed, 19 Mar 2014 09:25:05 +1100 by Mr Mohamed Razil Doray - [REDACTED]

1. MEMBERSHIP CATEGORY

R; Member Category: SingleAdult

2. APPLICANT

R; Title: Mr

N; Initials: MR

R; First Name: Mohamed Razil

R; Surname: Doray

3. SPOUSE

N; Title: Mrs

N; Initials: NA

N; First Name: Fathima Nathika

N; Surname: Ahamed

4. HOME ADDRESS

R; Street address: [REDACTED]

R; Suburb: [REDACTED]

R; State: Victoria

R; Post Code: [REDACTED]

R; Phone: [REDACTED]

R; Email Address: [REDACTED]

5. BUSINESS ADDRESS

N; Street: [REDACTED]

N; Suburb: [REDACTED]

N; State: [REDACTED]

N; Post Code: [REDACTED]

N; Phone: [REDACTED]

6. CHILDREN BELOW 18 Yrs

N; Children Below 18 yrs:

First Name:

Surname:

Gender (M/F):

7. NOMINATOR

R; Nominator Name: [REDACTED]
R; Nominator Phone: [REDACTED]
R; Agree to Abide Constitution: Yes

For Office Use Only

=====

Date Received:
Payment Method:
Membership Approved:
Date of Approval:
Date Applicant informed:
Signature of Secretary:

USMAA Australia <usmaanews@gmail.com>

19 March 2014 13:48

To: [REDACTED]

Asalam Bro Razil,

Thank you for you application to join USMAA. We will process it at the next meeting. In the meantime attached is the details of activities for the next few months.
Look forward to seeing you and your family at our events

Salaams
Ritzvi
Secretary

[Quoted text hidden]



USMAA Events Calendar April - August 2014.pdf

21K

USMAA Australia <usmaanews@gmail.com>

19 March 2014 13:48

To: Ritzvi Mohideen <mohamed.mohideen@monash.edu>

[Quoted text hidden]



New USMAA membership application via Website online form

15 March 2014 20:09

To: webmaster@usmaa.org.au, info@usmaa.org.au

USMAA Membership Application request submitted on Sat, 15 Mar 2014 20:09:19 +1100 by Mr Jazoor Mahumood - [REDACTED]

1. MEMBERSHIP CATEGORY

R; Member Category: FamilyAffiliate

2. APPLICANT

R; Title: Mr

N; Initials: J.M

R; First Name: Jazoor

R; Surname: Mahumood

3. SPOUSE

N; Title: Mrs

N; Initials: F.J

N; First Name: Fasmiya

N; Surname: Jazoor

4. HOME ADDRESS

R; Street [REDACTED]

R; Suburb [REDACTED]

R; State [REDACTED]

R; Post [REDACTED]

R; Phone [REDACTED]

R; Email [REDACTED]

5. BUSINESS ADDRESS

N; Street address:

N; Suburb:

N; State:

N; Post Code:

N; Phone:

6. CHILDREN BELOW 18 Yrs

N; Children Below 18 yrs:

First Name:

Surname:

Gender (M/F):

7. NOMINATOR

R; Nominator Name: Wajuhudeen
R; Nominator Phone: [REDACTED]
R; Agree to Abide Constitution: Yes

For Office Use Only

=====

Date Received:
Payment Method:
Membership Approved:
Date of Approval:
Date Applicant informed:
Signature of Secretary:

USMAA Australia <usmaanews@gmail.com>


18 March 2014 18:10

[REDACTED]

Asalam Bro Jazoor,
Welcome to USMAA. We will process your membership at the next meeting and send you the information. in the meantime please see attached activities of USMAA for the next few months.

Salaams
Ritzvi Mohideen
Secretary

[Quoted text hidden]

 **USMAA Events Calendar April - August 2014.pdf**
21K

USMAA Australia <usmaanews@gmail.com>

18 March 2014 18:14

To: Ritzvi Mohideen [REDACTED]

[Quoted text hidden]

USMAA Australia <usmaanews@gmail.com>

6 April 2014 09:26

Draft To: Jazoor Mahumood [REDACTED]

[Quoted text hidden]



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Family ☒

Pensioner ☐

Single ☐

Student ☐

Affiliate ☐

2. APPLICANT

Title: ☒ Mr ☐ Mrs ☐ Miss ☐ Dr

Initials:

First name: SMAIL

Surname: LACHTAR

3. SPOUSE

Title: ☒ Mr ☐ Mrs ☐ Miss ☐ Dr

Initials:

First name: NADIA

Surname: RAZACK

4. HOME ADDRESS

Street Address:

Suburb:

State: VIC

Post Code:

Telephone:

Email:

5. BUSINESS ADDRESS (OPTIONAL)

Street Address:

Suburb:

State:

Post Code:

Telephone:

6. CHILDREN (THOSE BELOW 18 YEARS ONLY)

NAME	GENDER

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25/03/14
Date

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NAME OF NOMINATOR

SIGNATURE

DATE