



SYRO MALABAR CULTURAL ASSOCIATION , KUWAIT

Guardians of a Glorious Tradition

I.E Reg.: INDEMB/KWT/ASSN/121

www.smcakuwait.org

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Registration Form For Individual Items **For Non SMCA Member**

Name of the Participant : _____

Date of Birth : ___/___/___ Civil ID No: _____ Group : _____

Faith Formation Class: _____ ID No: _____ Area : _____

Name of Father : _____

Civil ID No. _____ Mobile No. _____ E-mail : _____

Parish (India) : _____ Diocese (India) : _____

Item:

1. _____

2. _____

Declaration : All the information provided above is true. I have read and understood the rules and regulations of the Arts Competition. I undertake hereby that my family members and I shall comply with all rules & regulations.

Signature of Parent :

Date :