



**Health Web**  
of the Open University of Sri Lanka  
Faculty of Health Sciences  
Nawala, Nugegoda

For official use only  
Membership No: .....

**APPLICATION FORM**

Name: .....

Permanent Address: .....

Postal Address: .....

Email: .....

Contact Number: Home ..... Office ..... Mobile .....

Occupation: .....

Membership Category Applying for;

- [1] (a) Life Membership  [Rs: 2000.00]
- (b) Annual Membership  [Rs: 300.00 - valid for 1 year]
- [2] Student Membership  [Rs: 500.00 -valid for whole period registered at OUSL]

National Identity Card Number: .....

Registration Number (Students Only): .....

Programme registered for : .....

I hereby certify the information given by me is true and accurate to the best of my knowledge.

Signature of Applicant: ..... Date: ...../...../.....

[ If you are applying for Life membership please submit a stamp size photograph ]

**Office Use Only**

Membership type: ..... Accepted: Yes / No Date: ...../...../.....  
Effective Date: ...../...../..... Expiry Date: ...../...../..... Fees: .....  
President: ..... Treasurer: ..... Date: ...../...../.....

