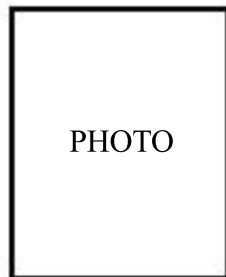




KARACHI UNION OF JOURNALISTS



MEMBERSHIP/PERSONAL DATA FORM

MEMBERSHIP NEW: _____ OLD: _____ MEMBERSHIP No: _____

MEMBER KARACHI PRESS CLUB: NO _____ YES _____ MEMBERSHIP NO. _____

NAME: _____ FATHER'S NAME: _____

DATE OF BIRTH: _____ CNIC NO: _____

QUALIFICATION: _____ MARITAL STATUS: _____

ORGANIZATION: _____

DESIGNATION: _____ DEPARTMENT: _____

EXPERIENCE:

ORGANIZATION	DESIGNATION	PERIOD

OFFICE ADDRESS: _____

OFFICE (PH): _____ FAX: _____

HOME ADDRESS: _____

RESIDENCE (PH): _____

CELL NO. _____ EMAIL: _____

SIGNATURE _____ DATE _____

FOR NEW MEMBERS

PROPOSED BY: _____ MEMBERSHIP NO.: _____

ORGANIZATION: _____ DESIGNATION: _____

CELL: _____ EMAIL: _____ SIGNATURE: _____

FOR OFFICE USE

Membership Approved / Membership Rejected

Secretary's Sign. _____ President's Sign. _____