



All India Malayalee Association (AIMA)

AIMA VOICE-2018

ENTRY FORM



Participating State :

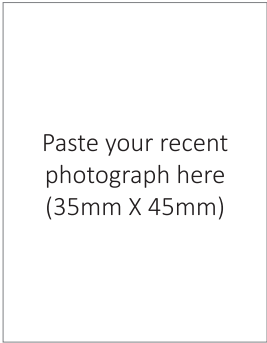
Name in BLOCK Letters :

Age (As on 01/01/2018) : Date of Birth:

D	D	M	M	Y	Y	Y	Y
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Name of Parent/Guardian :

Address for Communication :



Paste your recent photograph here (35mm X 45mm)

City/District :

State/UT : PIN:

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Email Address :

Mobile #:

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 Alternate Mobile #:

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Age Group (✓) : Group-A (10-15 yrs) Group-B (16-25 yrs) Group-C (26 yrs and above)

Duration of stay in current state : years months. Native City in Kerala:

Enclosures attached for age proof:

for address proof:

I carefully read the rules/instructions of Aima Voice 2018 and assure that I will abide by them.

Signature of Participant : Signature of Parent: Date :/...../.....

Signature of State Co-ordinator, Aima Voice-2018:

Signature of State Committee President/Secretary:

Office Stamp:
Date :/...../.....

FOR OFFICE USE ONLY.
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REGISTER NUMBER: