



MALANKARA MAR THOMA SYRIAN CHURCH DEPARTMENT OF SACRED MUSIC AND COMMUNICATIONS

Audio Visual Centre, S.C.S. Campus, Thiruvalla - 689 101

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Choir Affiliation / Renewal Form

01. Name of Parish/Institution : _____
02. Place : _____
03. Name and Address of the Vicar : _____

Phone (Parsonage) : _____ (Church) : _____
Cell : _____ Email : : _____
04. Name and Address of the Choir Master : _____

Phone : _____ Cell: _____ email: _____
05. Name and Address of the Choir Secretary : _____

Phone : _____ Cell: _____ email: _____
06. Total members (see overleaf) Male: _____ Female: _____ Total: _____
07. Day and Time of regular Practice : _____
08. Musical Instruments in regular use: _____
09. Year of formation: _____
10. Affiliation/Renewal for the Year: _____
11. Diocese and Centre: _____
12. Summary of the statements of the Accounts of the previous year
Total Receipts : _____
Total Payments : _____
Balance: _____

Instructions:

All fields (01-12) are required for affiliation/renewal.

Two copies are required to be filled in and submitted to DSMC office. The parish copy will be returned after affiliation/renewal.

FOR OFFICE USE ONLY



Reg. No.: _____ Amount: _____ Receipt No: _____

Date of Affiliation/Renewal : _____

Remarks if any _____

Signature of Director

