

Joining Damrivi community

If you wish to be kept updated of the programmes conducted by Damrivi please provide the following information;

Name of the applicant : .........................................................................................................................................................................................

Address : ...............................................................................................................................................

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Telephone : .......................................................... E - mail : .................................................................................

Male/Female : ........................................................ Age : ...........................................

Date Of Birth \*(optional) : ............................................................. Religion : ......................................................

Profession : ........................................................................ NIC No : ............................................................................

Place of work : ..........................................................................................................

Address : ..............................................................................................................................................................................

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I hereby declare that the above information furnished by me is true.

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Signature of the applicant Date

Post/ Hand over/ submit by email – the completed form to Damrivi Foundation, No.51/A, Isipathana Mawatha Colombo 5

Email – damrivi@sltnet.lk