



# NED Alumni Association Canada (NEDAC)

160 Carrington Drive, Richmond Hill, ON L4C 7Y8

Email: [info@nedalumnicanada.org](mailto:info@nedalumnicanada.org)

Please place your  
colored photo here

## APPLICATION FOR NEDAC MEMBERSHIP

### APPLICANT INFORMATION

Name: (First, Middle, Last)

Address:

City:

Province:

Postal Code:

Email:

Phone #:

Cell #:

Year of Graduation:

Discipline:

**Attention: Please attach supporting evidence of your graduation from NED to this application  
OR Two References of Existing NEDAC members (Name and Membership #)**

Reference 1:

Reference 2:

### EMPLOYMENT INFORMATION (OPTIONAL)

Current Employer:

Employer Address:

How long:

Phone:

E-mail:

### LIFE MEMBERSHIP FEE IS CD\$40.

[ ] I am enclosing payment of \$40, a onetime fee for enrolment as Life Member.

**Payment Made with this application is \$ \_\_\_\_\_ as Cash/ Cheque / E-Transfer.**

**1. CHEQUE SHALL BE MADE PAYABLE TO: "NED ALUMNI ASSOCIATION CANADA"**

**2. The cheque should be mailed to Membership Committee with the completed application form addressed to:  
Mohammed Perwez Alam, Tel: (416)4293506, E mail: [alamperwez@gmail.com](mailto:alamperwez@gmail.com)  
21 Arrowpoint Dr. Brampton, ON. L6Y0Y9**

New Member Signature:

Date:

Referred By (Name and Membership #) :

### FOR OFFICIAL USE ONLY

Membership # Allotted:

Date:

Name of NEDAC Official:

Signature of NEDAC Official: