

## **GGSCF Monthly Meeting – Guest Form**

If it is your first or second time at the monthly meeting the guest secretary will ask you to complete this form. The form is designed to learn more about you but also so you can be introduced to others.

NAME \_\_\_\_\_ SURNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ AGE \_\_\_\_\_ GENDER \_\_\_\_\_

SCHOOL/UNIVERSITY/OCCUPATION: \_\_\_\_\_

HOBBIES: \_\_\_\_\_

HOW DID YOU LEARN ABOUT THE MEETING?: \_\_\_\_\_

DATE \_\_\_\_\_ BRANCH LOCATION \_\_\_\_\_

Obtain an agenda so that you can follow the meeting. Please feel free to ask any questions.  
To learn more about the **Guru Gobind Singh Children's Foundation** please visit our web site at:  
**[www.ggscf.com](http://www.ggscf.com)**