

# MAURITIUS SOCIETY OF AUTHORS

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<b>OFFICE USE</b>
COSIS REFERENCE : _____
Input on system l _____
Examine by ; _____
Date: _____
MEMBERSHIP STATUS :
MEMBERS <input type="checkbox"/>
ASSOCIATE. MEMBERS <input type="checkbox"/>
RECEIVED ON :
Remarks:

## PERSONAL DETAILS

SURNAME:

OTHER NAMES :

TAN NUMBER :

NIC NUMBER :

HOME ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

MOBILE NUMBER :

HOME NUMBER :

EMAIL ADDRESS : \_\_\_\_\_

## BANK DETAILS

BANK NAME : \_\_\_\_\_

BRANCH : \_\_\_\_\_

ACCOUNT NUMBER :

IBAN NO /SWIFT NO ;

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_