

CHURCH MEMBERSHIP CERTIFICATE

(This Information is for UG - MBBS/BDS admissions 2024 – CMC
Ludhiana)

Date:

Name of the Candidate:

Date of Birth :

Father's Name :

Mother's Name :

Address.....

.....

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This is to certify that, as per our church records, Mr./Ms.

is a member of our Church from Till..... He /She is

a communicant / non-communicant member.

Name of the Church

Address of the Church:

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Name of Vicar:

Address.....

.....

Ph. No. Cell No.

E-mail.....

Vicar's signature with official seal & date.....

RT. REV. ZACHARIAS MAR APREM EPISCOPA

(Authorized Signatory of the Church of CMC Ludhiana
Society)

Address: **Mar Thoma Centre, 26, Bhai Vir Singh Marg,
Gole Market, New Delhi – 110001**

Telephone No.: 011-23348800

Signature with date

Seal