Le French Club
ISLAMABAD

International Members

REQUIRED DOCUMENTS

- Two passport size pictures (white background) of applicant, spouse & each child (12-18 years)
- Valid passport copies of applicants
- Official Embassy or Company letter confirming designation and position
- Copy of MOFA card or foreign resident card of all applicants
- If applicable: Copy of Diplomatic Enclave Access card

NOTE:

- Please note that this form is not to be used by Pakistani citizens holding another nationality, who are invited to use the "Resident & Overseas Pakistani Membership" form.
- Please return this form and the required documents to the Club by email (info@lefrenchclubisb.com) or WhatsApp (+92 334 698 8888), or drop them off at the Club's reception.

APPLICANT'S PARTICULARS FORM

Member's Photo
(with White Background)

Receipt #: _____ Date: _____

Package Charges: _____

Family Name: _____ First Name: _____

Nationality: _____ Date of Birth: _____ Place of Birth: _____

Passport Number: _____ Date of issuance: _____

MOFA or Foreign resident card number: _____ Date of expiry: _____

Name of the Embassy or Company you are affiliated with: _____

If applicable: Diplomatic Enclave Access card number: _____ Date of expiry: _____

Residential Address: _____

Email: _____ Phone #: _____ / _____

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SPOUSE DETAILS

Member's Photo
(with White Background)

Family Name: _____

First Name: _____

Nationality: _____ Date of Birth: _____

Passport Number: _____ Date of issuance: _____

MOFA or Foreign resident card number: _____ Date of expiry: _____

Occupation: _____

Residential Address: _____
(if different from Applicant)

Email: _____ Phone #: _____ / _____

Member's Signature (within the Box)

FAMILY DETAILS (Children 12-18 years old only)

Member's Photo
(with White Background)

Family Name: _____

First Name: _____

Date of Birth: _____

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Relation with main applicant: _____

Member's Signature (within the Box)

Family Name: _____

Member's Photo
(with White Background)

First Name: _____

Date of Birth: _____

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Relation with main applicant: _____

Member's Signature (within the Box)

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Family Name: _____

First Name: _____

Date of Birth: _____

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Relation with main applicant: _____

Member's Photo
(with White Background)

Member's Signature (within the Box)

Family Name: _____

First Name: _____

Date of Birth: _____

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Relation with main applicant: _____

Member's Photo
(with White Background)

Member's Signature (within the Box)

Family Name: _____

First Name: _____

Date of Birth: _____

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Relation with main applicant: _____

Member's Photo
(with White Background)

Member's Signature (within the Box)

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BANK DETAILS

Bank Name	BANK ALFALAH
Account Title	LE FRENCH CLUB
Account No	08321011096721
IBAN A/C No	PK91ALFH0832001011096721

NOTE

- We accept Visa, Mastercard, American Express, at Le French Club.
- Your membership application will be forwarded to the French Club. If accepted, you will receive a response within ten days.