Le French Club
ISLAMABAD

Resident & Overseas Pakistani Membership Form

REQUIRED DOCUMENTS

PAKISTANI NATIONALS RESIDING IN PAKISTAN

- Two passport size pictures (white background) of applicant, spouse & each child (12-18 years)
- Copy of CNIC / NICOP of applicant, spouse & each Child
- Passport copies of applicants
- If applicable: Copy of Diplomatic Enclave Access card

PAKISTANI DIASPORA

- Two passport size pictures (white background) of applicant, spouse & each child (12-18 years)
- Copy of CNIC / NICOP of applicant, spouse & each child
- Passport copies of applicants
- Proof of overseas residence (utility bill / residence permit)
- Business / employment proof (company letter / visiting card / profile)
- Visa / residency permit copy (if applicable)

NOTE:

- 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

Receipt #: _____ Date: _____

Package Charges: _____

Name: _____

Nationality: _____ Date of Birth: _____

Member's Photo
(with White Background)

CNIC/NICOP: | | | | | | - | | | | | | | - | | Passport Number: _____
(Attach photocopy)

Business / Occupation: _____ Name of Organization: _____

Residential Address: _____

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

Email: _____ Phone #: _____ / _____

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SPOUSE DETAILS

Member's Photo
(with White Background)

Date: _____

Name: _____

Nationality: _____ Date of Birth: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Passport Number: _____
(Attach photocopy)

Occupation: _____

Residential Address: _____
(if different from Applicant)

Email: _____ Phone #: _____ / _____

Member's Signature(within the Box)

FAMILY DETAILS (Children 12-18 years old only)

Name: _____

Member's Photo
(with White Background)

Date of Birth: _____ Nationality: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Relation: _____
(Attach photocopy)

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Member's Signature(within the Box)

Name: _____

Member's Photo
(with White Background)

Date of Birth: _____ Nationality: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Relation: _____
(Attach photocopy)

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Member's Signature(within the Box)

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Name: _____

Date of Birth: _____ Nationality: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Relation: _____
(Attach photocopy)

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Member's Photo
(with White Background)

Member's Signature(within the Box)

Name: _____

Date of Birth: _____ Nationality: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Relation: _____
(Attach photocopy)

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Member's Photo
(with White Background)

Member's Signature(within the Box)

Name: _____

Date of Birth: _____ Nationality: _____

CNIC/NICOP: | | | | | | - | | | | | | | | - | | Relation: _____
(Attach photocopy)

Passport Number: _____ Date of issuance: _____

Email: _____ Phone #: _____

Member's Photo
(with White Background)

Member's Signature(within the Box)

Le French Club
ISLAMABAD

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.