ATURE OF GROUP FORMA	TION: (Specify if cultural,	religious, professional, sports,
hobbyist, geographical et	c.):	
ONTACT PERSON :		
ESIGNATION :		
ONTACT DETAILS :		
(Mobile Number) :		
(Email Address) :		
	LIST OF OFFICERS	
NAME	DESIGNATION	PASSPORT or IQAMA NUMBER
	MEMBERS (as of 1 Janua Tovide additional sheets if no	
	ovide additional sheets if ne	
(Please pr	ovide additional sheets if ne	PASSPORT or IQAMA
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