

MEMBERSHIP APPLICATION

(Your privacy is respected. Any information provided here is not shared with any external entity)

Please check your status: New Member Membership Renewal Non-voting Membership
 Voting membership dues \$50 per person for fiscal year 2013

Sadaqah, Zakat, any other kind of donation (for operations only) will not be considered as Membership fee.

1. Applicant's legal name: _____
Last First Middle

2. YOB: ____ 3. Gender: Male Female 4. Marital Status: Single Married Widowed

5. Occupation: _____

6. Check if spouse wants to be a member: Yes No

7. Spouse's Name: _____
Last First Middle

8. Age: ____ 9. Occupation: _____

10. Address: _____
City State Zip

11. Telephone(s): _____
Home Work Cell

12. E-mail: _____

13. Preferred way of contact: e-mail Telephone Mailing Address

Payment: Cash Check, check # ____ Credit Card, Type: ____
 Credit Card Number: _____ Exp: __/____

I am a legal resident of the US. I meet member eligibility requirements of age (18 years), residence (1 year) in Greater Austin, and dues payment (\$50 per fiscal year). I do not have any felony violations against me. I pledge to abide by Arbitration Council decisions, in case of any conflict.

I have been made aware of the organization and structure of the North Austin Muslim Community Center. I fully agree with the Fundamental Statutes of the Constitution, and fully support its efforts to establish Islam through peaceful and legal means in this community.

I know that I do not have to completely agree with the whole constitution of the organization and its bylaws. If I disagree with any part, I have the right to solicit changes through established procedures, provided in the Constitution and its Bylaws.

Signature of Applicant: _____ Date: _____

Signature of Spouse: _____ Date: _____