



Membership Application Form

APPLICANT INFORMATION		
Family Name:	Given Name:	
Spouse Name:	65 years and over:	
ADDRESS INFORMATION		
Address:		
City:	Province:	Postal Code:
Home Tel:	Business Tel:	
Cell No:	Email:	

- Only members of ISU (Islamic Shia Ithna-Asheri Jamaat of Toronto) are eligible to be part of this organization.
- **For New Members Only:** Subject to the approval of the Senior Citizen Executive Committee Within 60 days from the Application Date.
- I/We agree to abide by the rules and regulations as laid down in the BY LAWS (of the Shia Ithna Asheri Senior Citizen Group of Toronto, Ontario), and any amendments that may be made from time to time.
- **Yearly Membership dues:**

Family —\$60/year	Single—\$36/year
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- Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY	
Date of Approval :	By Secretary:
By Executive:	