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THE ISLAMIC CENTER OF BOSTON

126 Boston Post Road, Wayland MA 01778 USA

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Phone: 508-358-5885 *Web Page:* www.icbwayland.org

ICB MEMBERSHIP RENEWAL FORM FOR YEAR: 2018 - 2019

In order to renew or apply for new ICB membership for the next financial year, please complete and sign this application and mail with your membership donation to the address above (see schedule of membership donations given below). If your previous membership information is included below, please review and make any corrections that are necessary. By signing below, you confirm the accuracy of this information.

Secretary, Islamic Center of Boston secretary@icbwayland.org

MEMBER:

Name First Member | Middle Initials | Name Last

Profession | Email Address

Home Phone | Mobile Phone | Work Phone

SPOUSE:

First Name | Middle Initials | Last Name

Profession | Email Address

Home Phone | Mobile Phone | Work Phone

HOME ADDRESS:

Number And Street | Apartment

City | State | Zip

PRIMARY COMMUNICATION Method: (PLS CHECK) Email: ☐ **Mail:** ☐

COMMENTS: .....

MEMBER'S SIGNATURES: _____ **DATE:** _____

MEMBERSHIP ID: _____

SPOUSE'S SIGNATURES: _____ **DATE:** _____

MEMBERSHIP ID: _____

IMPORTANT PLEASE NOTE

1. Family (up to two regular adult individual members) donation is $200.00 per year.
2. Single (one regular adult individual member) donation is $100.00 per year.
3. Youth (18yrs+ student & children of regular adult member) donation is $50.00 per year.
4. Center's financial year runs from September through August of the next year.
5. Membership donations are due when registering for Sunday School.