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THE ISLAMIC CENTER OF BOSTON

126 Boston Post Road, Wayland MA 01778 USA

Phone: 508-358-5885

Web Page: www.icbwayland.org

ICB MEMBERSHIP RENEWAL FORM FOR YEAR: 2010-2011

Assalamualaikum,

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.

Regards,

Mario Moreira, 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:

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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 on September 1.