



## MASJID HAMZA MEMBERSHIP FORM

**Instructions/Reminders:**

- Membership is valid for one year (January 1<sup>st</sup> to December 31<sup>st</sup> of each year).
- Membership fee is \$100 per person.
- Please note that you need to be a member for two consecutive years to be eligible to vote.
- Enter information as it is on your identification card that you will present to vote.

**\*Type of membership:**  New (Not member previous year)  Renewal (Member previous year)

**\*Select one:**  Ms.  Mrs.  Mr.  Dr.

**\*LAST NAME:** \_\_\_\_\_ **\*FIRST NAME:** \_\_\_\_\_

**\*ADDRESS:** \_\_\_\_\_

**\*PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

*\*Required Fields*

**Declaration:** I am a Muslim who believes and declares that there is no one to be worshipped except Allah (SWT) and that Muhammad (PBUH) is His final Messenger and Prophet. I am 18 years old and I accept and agree to abide by the provisions of Masjid Hamza’s constitution and by-laws. I further understand that donations and monetary contributions given at Masjid fundraisers do not constitute membership fees.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Privacy Note:** We protect your privacy and by not initialing this form, you give us the consensual right to publish your name on the Voting Board List, which then becomes public. By initialing, you have chosen the right to NOT publish your name. I do not wish the name above to be open to the public: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
Application Receipt Date: _____	Receiving Masjid Official: _____
	Receiving Masjid Official: _____
Method of Payment: Cash _____ Check # _____	Amount Received: _____