

Florida Hindu Organization Inc.

P.O. Box 9003

Ft. Lauderdale, FL 33310-9003

Phone: (954)-735-3560

Email Address: www.fhosm.com

Shiva Mandir

FINANCIAL MEMBERSHIP APPLICATION FORM

APPLICANT'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS PHONE: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

SPECIAL SKILLS: _____

ARE YOU WILLING TO SERVE ON COMMITTEES? Yes No

FINANCIAL MEMBERSHIP FEE: \$25.00 per Person

I hereby apply for financial membership to the FLORIDA HINDU ORGANIZATION INC. and pledge that I am of good character and will abide by the Articles of Incorporation, the BY-LAWS and RULES of the organization. I am aware that this is a religious, cultural and non-profit organization and I join it on my own free will. I further pledge that at all times I will work for the upliftment of this organization. I shall endeavor to do my best for the propagation of Hinduism.

Dated this _____ day of _____ 20_____ in the State of Florida

Signature

A NON- PROFIT ORGANIZATION

Please mail completed application with payment to the above P.O. Box address
or hand deliver to an executive member