



BRAHMAN SAMAJ OF NEW YORK, INC. (BSNY™)



1051 Denton Ave., New Hyde Park, NY 11040
C: (646) 431-9471, Email: brahmansamajny@gmail.com

Life Membership Application Form

BSNY No: _____

Life Membership: \$101.00

Please make check payable to "Brahman Samaj of New York, Inc."

<u>Last Name</u>	<u>First Name</u>	<u>Middle Name</u>	<u>(Optional)</u> <u>Gautra:</u>
Address: _____			<u>Birthday:</u>
Cell No: _____			Home Ph. No: _____
Email: _____			

Relationship	Name	Birthday (Optional)
Spouse		
Children Under 18 years of Age		
Children Under 18 years of Age		
Children Under 18 years of Age		

Having learnt about Brahma Samaj Of New York, Inc., I have decided to become the Life Member of Brahma Samaj Of New York, Inc. I understand that Life Membership Fees are not refundable.

Signature: _____ Date: _____

For Executive Committee Use Only

Received by (Name, Title, Initial): _____

Amount: \$ _____ Check Cash Receipt No: _____ Date: _____