

Sanatan Dharma Temple and Cultural Center

(A Non-profit Organization Registered in the State of Washington)

19826 SE 232nd Street, Maple Valley, WA 98038

Mailing Address: P O Box 142, Maple Valley, WA 98038-0142

Ph: (425) 413-8900

<http://www.SanatanDharmaTemple.org>

Membership/Pledge/Donation Form

Name: _____ Spouse's Name: _____
(First Name) (Last Name) (First Name) (Last Name)

Address: _____

City/State/Zip: _____

Phone: () _____ - _____ E-Mail Address: _____

Name(s) of Employers: _____

Membership Fees:

\$ 51	Annual Member - Individual	\$ 101	Annual Member - Family
\$ 1,001	Life Member - Individual	\$ 2,100	Life Member - Family
\$ 5,000	Donor Member - Family	\$ 50,000	Patron Member - Family

I/We apply for the membership of the Sanatan Dharma Temple and Cultural Center. I/We hereby declare that I/we am/are above 18 years of age and have faith in Hindu religion. I/We will support the objectives of the organization and pledge to abide by its constitution and its by-laws.

Pledge/Donation:

I/We hereby declare an **Amount of \$** _____ Monthly/Quarterly/Yearly/One-time Pledge/Donation to Sanatan Dharma Temple & Cultural Center.

Signature: _____ **Date:** ____/____/____

Spouse's Signature: _____ **Date:** ____/____/____

OFFICIAL USE ONLY:

Amount Recd for: Membership / Pledge / Donation

Receipt No: _____

Membership Type: Individual / Family

For Year: 2009 / 2010/ Life / Donor / Patron

Pledge/Donation: Monthly / Quarterly / Yearly / One-time **Amount: \$** _____ **Recd by:** Cash /Check

Check Number: _____ **Drawn on:** _____ **Dated:** _____

Application Approved: Yes / No **Official Signature:** _____ **Dated:** _____