



South Jersey Hindu Temple and Cultural Society, Inc. (SJHTCS)

(A Non-Profit, Tax-Exempt Organization)

PO Box 534 • Mount Laurel, NJ 08054 • Telephone 856.514.0724

<http://www.sjshirdisai.org>

All membership-related enquiries must be directed to:

membership
@sjshirdisai.org

MEMBERSHIP APPLICATION FORM

Please familiarize yourself with the membership rules before completing this form. The application form must be completed in full and signed. **In case of a joint application, spouse's information must be provided.** Fields marked by an * are required. E-mail addresses collected will be used for SJHTCS correspondence and for notification of Temple events. Please consult your tax attorney/accountant to determine whether membership dues are tax-deductible.

APPLICANT INFORMATION

Print Name: Last *	First *	Middle Initial	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.	Gender * <input type="checkbox"/> M <input type="checkbox"/> F	Legal Resident of USA * <input type="checkbox"/> Yes <input type="checkbox"/> No
Spouse's Name: Last *	First *	Middle Initial	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.	Gender * <input type="checkbox"/> M <input type="checkbox"/> F	Legal Resident of USA * <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (Street Name and Number) *		Apt. #	Telephone (Home) *		Telephone (Work/Mobile) *
City *		State *	Zip Code *	E-mail Address *	

MEMBERSHIP CATEGORIES AND DUES

Are you an existing member? * <input type="checkbox"/> Yes <input type="checkbox"/> No	Dues Paid So Far \$ _____	<ul style="list-style-type: none">Membership dues paid partially or in full must accompany each membership application.General donations cannot be transferred towards membership dues, unless specified in writing at the time of payment.Membership dues must be paid in full within the specified installment period.Payment of membership dues for family members is allowed. Family includes spouse, children, grandchildren, sons-in-law, daughters-in-law and siblings. No other third party payments will be accepted.				
If "Yes", what is your current membership category? <input type="checkbox"/> Benefactor/Patron <input type="checkbox"/> Life Member <input type="checkbox"/> Annual Member						
PLEASE SELECT MEMBERSHIP TYPE BELOW						
Membership Category	Minimum Dues		Payable In	New Membership	Upgrade	No. of Installments
Benefactor/Patron	\$ 5,000		2 years	<input type="checkbox"/>	<input type="checkbox"/>	
Life Member	\$ 1,116	1 year	<input type="checkbox"/>	<input type="checkbox"/>		
Annual	\$ 116	1 Month	<input type="checkbox"/>	<input type="checkbox"/>		

PAYMENT INFORMATION

Total Payment Due * \$ _____	Payment Method * <input type="checkbox"/> Cash <input type="checkbox"/> Check	If the payer is other than the applicant	Payer's Name: Last * First *	Relationship to Applicant *
Payment Included * \$ _____			Address *	Telephone *
Please make check payable to: SJHTCS, Inc.		Cash payments in excess of \$10,000 will not be accepted.	A new applicant becomes a member only after approval by the Board of Trustees. If the application is not accepted, all dues collected will be returned.	

ACKNOWLEDGEMENT AND CERTIFICATION

By signing this Membership Form, I/we acknowledge that I/we am/are 18 years of age or older, am/are the legal resident(s) of the USA, and have been advised of the rules governing membership to the SJHTCS. I/we certify that the information provided herein is true to the best of my/our knowledge and belief. I/we affirm my/our firm belief in the Hindu religion, its culture and traditions and pledge to support the mission and the activities of the SJHTCS. I/we further agree to comply with all applicable rules, terms and provisions of the SJHTCS as they currently exist or as enacted in the future by the governing body of the SJHTCS.

Applicant's Signature *

Spouse's Signature *

Date *

FOR SJHTCS USE - Do not write below this line

<input type="checkbox"/> Cash <input type="checkbox"/> Check	Amount Received \$ _____	Receipt No.	MEMBERSHIP APPROVAL	
Notes:			<input type="checkbox"/> Yes	Signature - Membership Committee
			<input type="checkbox"/> No	



SJHTCS Inc.

PO BOX 534, MOUNT LAUREL, NJ 08054

Phone: (856) 5140-SAI

www.sjshirdisai.org

Email: membership@sjshirdisai.org

Board Member Benefits

South Jersey Hindu Temple & Cultural Society, Inc. (SJHTCS) has grown to be the heart of the Indian community in South Jersey. You can become a member and take advantage of all the benefits the organization provides.

You can engage and immerse yourself in the richness and beauty of our culture and impart this heritage to your children as your most valuable legacy. You can keep alive the religious and spiritual aspects of your life and find peace and fulfillment. Make new friends, find joy in community service and enrich your life in the process.

Membership in the SJHTCS is encouraged to provide you an opportunity to participate in major board decisions and to jointly create an excellent place of worship and spiritual learning for current and future generations and help support our mission.

Becoming a SJHTCS member not only supports the daily functioning of the organization, but also provides membership benefits as mentioned below:

Membership Benefits:

- Eligibility to apply for Executive Committee (EC) positions.
- Voting privileges to choose EC and Board members.
- Each individual membership will get one vote and each family membership two votes.
- Voting rights for key organization decisions.
- SJHTCS Annual Event Information.
- SJHTCS program invitations for special annual programs by postal mail and occasional updates about SJHTCS activities.
- Exclusive online content including financial and tax statements.
- All donations to SJHTCS are tax deductible.