

Islamic Society Of Greenville (ISG)
2010 Membership Registration Form

www.greenvillemasjid.com

Mailing Address: P.O. Box 25721, Greenville, SC 29616

Street Address: 96 Meridian Avenue, Taylors, SC 29687

Note: The purpose of this form is for New and Renewal Membership Registration. Membership entitles you to vote in the annual election of the Executive Council and also on referendums or changes to the ISG constitution. Forms and membership dues of \$25 must be submitted before 30th of June of each year.

Section 1 (Personal Information – Please Print in Block Letters)

Title: (Check One): Mr. Mrs. Ms. Dr.

Last Name: _____

First Name: _____

Spouse's Name: _____

Street address: _____

City _____ State _____ Zip _____

Phone Number _____

Email address _____ @ _____

Section 2 (Please review statement below and sign)

I am a Muslim over the age of 18 years believing that "There is only One God (Allah) and Muhammad (Peace be upon him) is the last prophet of Allah (God)

Signature _____ Date (required) _____

Section 3 – Membership Sponsorship (Required ONLY for New Members)

ISG Member Sponsor Name (Please Print) _____

ISG Member Sponsor Signature _____

Section 4 – Membership Fees Waiver Request

Would you like to request that ISG waive the \$25 fee for you due to financial constraints?

Please Check one Yes No

ISG may consider your request and may contact to you to discuss

**PLEASE MAIL FORM AND \$25 CHECK (PLEASE NO CASH) TO:
ISG, P.O. BOX 25721, GREENVILLE, SC 29616**

Section 5 – Monthly Automatic Donation for Masjid (ACH)

We rely on donations from generous brothers and sisters in our community to operate the Masjid and offer services such as a full-time Imam, Eid, and other events. We need more regular donations from more people to improve our financial stability so please help us if you can. We can automatically deduct your contribution from your bank account for your convenience. Donations to ISG are tax deductible (Tax ID#: 57-0885875). Please complete the following information if you wish to join. ***Attaching a voided check will help us fill in the account/routing number if you are unsure of that information***

Monthly Donation Amount (check one):

\$200 \$100 \$50 \$35 \$25 Other/Specify: \$ _____

Bank Name _____

Bank Account Number _____

Account Type: Checking Savings (Check One)

Bank Routing Number _____

Authorization Signature _____

Withdrawal Start Month/Year _____ Withdrawal End Month/Year _____

Note: If you would like to end or modify your monthly donation please send your request in writing to ISG or email to: treasurer@greenvillemasjid.com