

MEMBERSHIP FORM



FOR OFFICIAL USE ONLY	Affiliation Types	
MEMBERSHIP NO <input type="text"/>	Monthly Membership <input type="checkbox"/>	Donations <input type="checkbox"/>
DATE OF REGISTRATION <input type="text"/>	Yearly Membership <input type="checkbox"/>	
OFFICIAL SIGNATURE <input type="text"/>	Volunteer <input type="checkbox"/>	

PERSONAL DETAILS

NAME: _____ MALE FEMALE

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: (_____) _____ CELL: (_____) _____

EMAIL: _____ PROFESSION: _____

You may have an option to choose one or all of the followings.

MEMBERSHIP PER HOUSEHOLD \$10 per month \$100 per year

PARTICIPATE AS A VOLUNTEER (There is no fee for volunteer, however, you may donate.)

DONATIONS _____

Please make all checks payable to "Minhaj-ul-Quran International North America".

I WOULD LIKE TO RECEIVE "**MONTHLY NEWSLETTER/ AUDIO MAGAZINE**" YES NO

COVENANT OF MEMBERSHIP

I, _____, freely represent myself for the membership of Minhaj-ul-Quran International North America. I shall always seek the pleasure of Allah (SWT), and develop my love for the Holy Prophet Muhammad (PBUH). I will work for the presentation of the True Islam, which consists in promoting Peace, Tolerance, Humanism, Wisdom, Brotherhood, Harmony, and Unity among all human beings. Therefore, I shall always reject any interpretation of the Holy Scriptures that would lead to violence, hatred, extremism, radicalism, and terrorism among all human beings. I shall also respect and follow the laws of the country where I live, promote social integration, and bring my contribution to the society as a respectable citizen.

DATE _____ SIGNATURE _____

Mail TO: MINHAJ-UL-QURAN INTERNATIONAL NORTH AMERICA
 P.O BOX 700551
 DALLAS, TEXAS 75370-0551