

ISLAMIC SOCIETY OF LAWRENCE

Membership Application

Status: New Member Renewing Member

Choice*: Voting Member Non-Voting Member

Applicant Information:

Mr. Ms. Mrs. _____
First Name Last Name MI

If renewing member, did any information change since last time? Y N

If yes, please update information below. Otherwise, please sign application and submit.

Address City State Zip Code

Email Address Phone

Emergency Contact Name and phone

Member Since Reference Name and phone

Annual Membership Fee: Individual (\$20) Student (\$10) Waiver Requested

Membership application & dues have been received by _____ on _____
to be submitted to ICL board for approval.

Dues Paid \$ _____ Check No. _____ Cash

Signature of Applicant** _____ **Date** _____

* Being a member of ICL engages you in many ways, one important one is voting. Your vote is essential to hold GA official meetings. Missing three consecutive meetings will forfeit your voting rights and will become a Non-Voting member.

** Signature indicates that the applicant meets membership requirements and agrees to abide by and uphold the constitution and bylaws of ICL.

Membership Cmte Use Only

Membership Cmte Approved Denied

Signature of the reviewer _____ Date _____

Office Use Only

ICL Board Approved Denied

Application Processed on _____ by _____

Membership Starts on _____