

In the Name of Allah, the Most Compassionate, the Most Merciful
Application for Membership of Bangladesh Islamic Centre of NSW Inc.
 (Registration No.Y10259-00)

Are you at or over 18 years of age? YES NO

Applicant's Particulars (Use Capital Letters) _____

Title	First Name	Middle Name Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>
Family Name		
<input type="text"/>		
Number and Street		
<input type="text"/>		
Suburb	State	Post Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
E-mail Address		
<input type="text"/>		
Home phone No.	Mobile phone No.	
<input type="text"/>	<input type="text"/>	
Work phone No.		
<input type="text"/>		

Centre of NSW Inc. In the event of my admission as a Member / Life Member, I agree to follow Centre's rules and bound by the constitutional provisions of the Centre as applicable. I also declare that I am a Muslim by faith.

Signature of the applicant	Date
<input type="text"/>	<input type="text"/>

We the members of the Centre, nominate the above person to become a Member / Life Member of the Centre. We personally know this person.

Nominator's Full Name	Membership No.	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Secunder's Full Name	Membership No.	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Office Use Only

Membership No.	<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected									
<input type="text"/>											
President Signature	Date	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th colspan="2" style="text-align: left;">RECEIPT</th></tr> <tr><td style="width: 50%;">Date</td><td></td></tr> <tr><td>No.</td><td></td></tr> <tr><td>Amount</td><td></td></tr> </table>		RECEIPT		Date		No.		Amount	
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