



# SAURASHTRA PATEL CULTURAL SAMAJ

## Membership / Change of Family Information Form

PLEASE CHECK THE APPROPRIATE BOX:

- ☐ Add my name and family information in the SPCS database and next directory.
- ☐ Make revisions, as noted, in the SPCS database and next Directory.  
My SPCS Life Member No.: LM\_\_\_\_\_
- ☐ I want to join SPCS as a Life Member. Membership fee \$250 USD enclosed.  
(Fee will increase to \$500, effective July 6<sup>th</sup>, 2015)

Please make the check payable to: **SPCS**  
Mail the form and check to: Piyush Ghelani  
920 Saint Mark Drive  
Murphy, TX 75094

### FOR SPCS USE ONLY

Date Received: \_\_\_\_\_

Check No. \_\_\_\_\_

LM No. \_\_\_\_\_

### MY CONTACT INFORMATION

Name: \_\_\_\_\_  
Address in USA : \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Office Phone\*: \_\_\_\_\_  
E-mail Address\*: \_\_\_\_\_  
(\* - Office Phone and e-mail address will not be printed in the Directory)

### MY FAMILY DATA

	Member	Spouse
Last Name (As officially used)		
Original Surname (Only if last name is "Patel" For wife - please indicate maiden surname)		
First Name		
Middle Name		
Occupation		
Father's Name (First, Middle, Last)		
Hometown and District in India		

### CHILDREN

First & Middle Names	Last Name	Birth Year	Male/ Female	Married/ Single

1. Life Membership covers spouse, unmarried children, parent and relative who are alone in USA AND living with the member. Separate membership is required for all married persons.
2. Please allow 30 days to receive your new Life Member number.
3. SPCS cannot control the sharing of the information in the directory. Therefore, we request you to please provide ONLY information that you are willing to have printed in the Directory. Thank you.

Member Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_