

Head of the Family:

## Gujarati Samaj of Montreal



## Membership Form

Adult \$15, Students \$ 8,

Kids under 12 FREE

Year of First Name Last Name M Amount Birth Address City Postal Code Province Home Mobile Tel. Other Tel. e-mail\* Family Members: Year of First Name Last Name Relationship Phone No. e-mail\* Amount Birth 6 8 \* by providing my e-mail address, I consent to receiving e-mails from Gujarati Samaj of Montreal.

☐ Please **DO NOT** include my family information in the samaj directory as part of the Diwali publication.

Signature:

I am enclosing a cheque made out to the **Gujarati Samaj of Montreal Inc.** for the amount of **TOTAL:** 

Date