



Gujarati Samaj of Montreal

જ્યાં જ્યાં વસે એક ગુજરાતી ત્યાં ત્યાં સદાકાળ ગુજરાત



Membership Form

Head of the Family:

| | First Name | Last Name | Age | Amount |
|---|------------|-----------|-------------|--------|
| 1 | | | | \$ |
| | Address | | | |
| | City | Province | Postal Code | |
| | Tel No. 1 | Tel No. 2 | | |
| | e-mail* | | | |

Adult \$15
Students & Kids
under 18 are
FREE

Family Members:

| | First Name | Last Name | Relationship | e-mail* | Age | Amount |
|---|------------|-----------|--------------|---------|-----|--------|
| 2 | | | | | | \$ |
| 3 | | | | | | \$ |
| 4 | | | | | | \$ |
| 5 | | | | | | \$ |
| 6 | | | | | | \$ |
| 7 | | | | | | \$ |
| 8 | | | | | | \$ |

* by providing my e-mail address, I consent to receiving e-mails from Gujarati Samaj of Montreal.

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

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

Signature:

Date