

## Manhattan Downtown Bangladeshi Community Association, Inc. ম্যানহাটান ডাউনটাউন বাংলাদেশী কমিউনিটি এসোসিয়েশন, ইনক.

160 Allen Street #20, New York, NY 10002 Tel: 347-248-9726 mdbcassociation2019@gmail.com

| Date:                   |                                | সাল্প্য নং/Membership No.#                                   |
|-------------------------|--------------------------------|--|
| টাদা দাতার নাম/Membe    | r's Name :                     |  |
| পিতা/স্বামীর নাম/Father | /Husband's Name :              |  |
| বৰ্তমান ঠিকানা/Current  | Address                        |  |
|                         | 100 mm 100 mm 1                | CVIII/Phone :  |
| বংসর / Year:            | Stat / Payment : \$            | এককাশীন চাঁদা / Life Member : \$                             |
| क्षात्रा/In words : (   | To de                          | ) ধন্যবাদ/Thank You  |
| সভাপতি/President        | आधारक अञ्चलक/General Secretary | ক্রেমার্ডাস্থানিক বিল্লাস্থানীর স্বাক্রে/Collector Signature |





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A Not-For-Profit, Socio-Cultural Organization, Established: 2019

## APPLICATION FOR MEMBERSHIP (Last) (First) (Print) (Middle) (Last) (First) (Middle) Apt. # City State Zip: 6. Phone Number (Cell) (Home) (Email) PLEASE CHECK ONE BELOW TO QUALIFY MEMBERSHIP T BY LIVING THROUGH BLOOD TRELOCATION FROM DOWNTOWN PLEASE CHECK ONE BELOW FOR MEMBERSHIP CATAGORY T LIFE MEMBER ☐ GENERAL MEMBER LIFE MEMBER ONLY (Please Complete Spouse's Information Below) Spouse's Name (Middle): Year of Birth I, the undersigned do hereby agree to abide by the constitution of Menhatteri Downtown Banaladeshi Community Association. inc. and State that the above information are correct to the best of my knowledge. Date: (MM/DD/YYYY) Introduced by (Including Membership No.) Signature (Applicant) OFFICE USE ONLY Serial No : Membership for the year of Amount Received (\$ \_\_\_\_\_\_ in Words \_\_\_\_\_ Type of Payment: Cash Money Order Check (Bank & Check) #..... Collected by

MEMBERSHIP FEE: LIFE \$500 (ONE TIME INCLUDING SPOUSE)
GENERAL: \$20 PER YEAR (2 YEARS MEMBERSHIP REQUIRED TO VOTE)

GENERAL SECRETARY

DATE

DATE

TREASURER





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