



MEMBERSHIP FORM 2011

Sindhi Community of Northern California

www.sindhicommunity.org

P.O.Box 1709

Fremont, CA 94538

Membership Fees:

Membership Fees are due JAN 2011 and valid for the entire year. Donations are welcome and encouraged along with membership fees. Please make checks out to SCNC and mail to P.O. Box 1709, Fremont, CA 94538

Adults/Seniors: \$5.00

Children (6-18 yrs): \$2.00

Children (0-5 years): Free

Name: _____

Email: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Telephone: _____ Work Telephone: _____

Member Information:

Please provide your Family member's information. We also encourage you to tell us about any special interests so SCNC can structure activities towards those interests.

Name	Relationship	Birth Date (mm/dd/yy)	Email Address

PLEASE INDICATE YOUR INTERESTS (check all that apply) IN THE FOLLOWING EVENTS:

Summer Picnic Guru Janam Cheti Chand Diwali

New Year's Eve Thadri Satnarayan Pujas

Other: _____

INTERESTED IN VOLUNTEERING?: Yes No

If Yes, indicate activities: _____

I, while participating in any SCNC event, or any members of my family or my guests that participate – release SCNC and its Board and officers from any and all liabilities for injury and / or damage to any person or property. I also give my authority and permission to SCNC for taking any and all actions, which seem necessary in the event of injury and / or damage to persons or property. I have read and fully understood the terms of this liability release

Signature: _____ Date: _____

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