



# MEMBERSHIP FORM FOR 2012

Personal Information

Date

First Name

Middle Name

Last Name

Spouse Name

Address 1

Address 2

City

State

Zip Code

Phone Number

E-mail Address

Membership Type

Single (Student) Member \$200/Year

Annual Member \$365/Calendar Year per family

Premium Member \$1000/Year

Life Member \$10,000 or per family

Additional Donation \$ \_\_\_\_\_

Signature \_\_\_\_\_

Date

Make your membership checks payable to: **Tri-State Hindu Temple**

**Mailing Address:** Tri-State Hindu Temple  
6044 Vann Road  
Newburgh, IN 47630

Website: [www.tristatehindutemple.org](http://www.tristatehindutemple.org)