

# JAIN TEMPLE OF NEW YORK

271-09 80th Avenue, New Hyde Park NY 11040  
(718) 470-0000

Web site: [jaintempleny.org](http://jaintempleny.org) E-mail: [info@jaintempleny.org](mailto:info@jaintempleny.org)

**NON PROFIT ORGANIZATION - Federal ID 27-1308971**

FORM FOR  MEMBERSHIP  DONATION  PLEDGE  CHANGE OF ADDRESS  E-MAIL

NAME: \_\_\_\_\_  
LAST NAME MIDDLE

OCCUPATION: \_\_\_\_\_ PHONE [Cell] \_\_\_\_\_ [R] \_\_\_\_\_

SPOUSE: \_\_\_\_\_ [O] \_\_\_\_\_  
FIRST NAME OCCUPATION:

CHILDREN 1: \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
NAME / BIRTH DATE NAME / BIRTH DATE NAME / BIRTH DATE

ADDRESS  
 CURRANT \_\_\_\_\_  
STREET / APT # CITY STATE ZIP COUNTRY

ADDRESS  
 OLD ADDRESS \_\_\_\_\_  
STREET / APT # CITY STATE ZIP COUNTRY

e-mail \_\_\_\_\_ Present Member  NO  YES TYPE/ YEAR \_\_\_\_\_

**Please make check payable to " Jain Temple of New York." Mail  
to 271-09 80th Ave. New Hyde Park, NY 11040**

Type of membership	Name of Member	Spouse
<input type="checkbox"/> \$ 201 Single/Family Life Membership	<input type="checkbox"/> \$ _____ Donation	
	<input type="checkbox"/> \$ _____ Yearly Pledge	
<input type="checkbox"/> \$ _____ ( Value \$ 250 or more)	Donation in kind	

SIGNATURE & PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

- 1 Please use this form for :
- A. Giving donation to the center in cash or kind of approximately \$ 250 value
  - B. New enrollment - Change of address - or change in family information, if any
  - C. Making pledge to the Temple
2. You can make photo copies of this form, if you need additional copies
3. Be a proud to be a member of JTNY and make other Jain family members to strengthen our community

THANK YOU JAI JINENDRA

<p style="text-align: center;">Office use</p> <p>Application Received Date _____</p> <p>Application Approved Date _____</p> <p>Receipt Hand delivered <input type="checkbox"/> Mailed <input type="checkbox"/></p>	<p>Remarks _____</p> <p>_____</p> <p>_____</p>
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