

**IN THE NAME OF ALLAH, THE BENEFICENT, THE MERCIFUL,
ISLAMIC SHIA ITHNA-ASHERI ASSOCIATION OF OTTAWA
(NATIONAL CAPITAL REGION) CANADA**

3856 Old Richmond Road, Nepean, Ontario K2H 5C4 Tel: (613) 912-8294
<https://www.facebook.com/groups/ISIAOTTAWA/> e-mail info@isia-ottawa.com

MEMBERSHIP APPLICATION FORM

Pursuant to Article 4 of the Association Constitution, all followers of the Shia Ithna-Asheri Ja'fari faith Resident of Ontario and Quebec and of full age of 18 years and over shall be eligible, upon application, to Become members of the Association.

Family Name: _____ Given Name/Names: _____
Spouse Name: _____ No. Of Children under 18: _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Telephone: _____ Cell: _____ E-Mail: _____

MEMBERSHIP TYPE: (Please Check)

_____ Family (\$ 350.00)
_____ Single (\$ 200.00)
_____ Students (Age 18 and over) \$ 150.00
_____ Senior Single \$ 150.00
_____ Seniors Family (Age 65 and over) \$250.00
_____ Honorary (\$14.00)

DONATIONS: (Optional, Please specify)

Resident Alim Fund (\$____)
Centre Maintenance Donations (\$____)
Muharram Donations (\$____)
Madressah Donations (\$____)
Others (Specify) _____ (\$____)

Please donate generously for Islamic causes

Total Membership Dues: \$ _____

Total Donations: \$ _____

Grand Total Enclosed: \$ _____

Please indicate your preferred method of payment Full Payment _____ or Installments _____

Cheques(s) should be written in the name of **ISIA OTTAWA**

You can pay the dues/donation via cash/cheque/debit/credit/email money transfer. Will add paypal soon
(One Official Tax receipt will be issued for all donations combined towards yearend while temporary receipt is issued every time you make a donation)

I hereby apply for membership of the ISIA Association of Ottawa, I agree to abide by the rules and Regulations as laid down in the Association's Constitution and any amendments that may be made from Time to time.

Signed: _____

Dated: _____

(FOR NEW MEMBERS ONLY)

Two members of the Association (in good standing) should sign in support of this application:

Name & Signature of Member # 1: _____ Dated: _____

Name & Signature of Member # 2: _____ Dated: _____

Approved by the ISIA OTTAWA: _____ Dated: _____

ISIA Ottawa Executive Committee

A non-profit Canadian Charitable Organization - Registration No. 0951392-39 (89334 7567 RR 0001)