# HINDU SOCIETY OF MINNESOTA

**10530 Troy Lane N, Maple Grove, MN 55311**
**Tel: 763.425.9449; Web site: www.hsmn.org**

## Trustee/Membership Application Form

*Application Date:*

*Trustee/MemberInformation*

Name:_____ Occupation:_____

Spouse Name:_____ Occupation:_____

Address: _____

City:_____ State: _____ Zip: _____ Home Tel #: _____

Email: _____ Cell#:

Child/Children's Name(s):_____
_____

| | | | |
|---|---|---|---|
| LIFE-TIME TRUSTEE | | $7,500 | One-time Payment |
| | ○ | | Pay In Installments<br>(Not to exceed a time span of 3 years.<br>Please contact Membership Chair for details) |
| TRUSTEE MEMBERSHIP | ● | $1000 | Initiation Fee($500)+1st Year Dues($500)<br>(Renewal dues of $500 need to be paid annually before Mar 31st) |
| GENERAL MEMBERSHIP | ○ | $100 | Annual Payment |
| FAMILY MEMBERSHIP | ○ | $250 | Annual Payment |
| STUDENT MEMBERSHIP | ○ | $50 | Annual Payment |

**Amount: $** **Check Number:** **Date:**

(Checks payable to: **Hindu Society of Minnesota)**

Card # Exp. Date:

I will abide by HSMN Constitution and Bylaws (can be accessed at www.bit.ly/HSMN-Bylaws ) and authorize HSMN for using my email for future communication(s).

_____
Signature

(All donations are tax deductible; please consult your tax professional – Federal Tax ID. No: 41-1345301.)

Rev. Dt. Apr 2018