

The Islamic Center of Cedar Rapids, Iowa

2999 1st Ave. S.W., P.O. Box 8446, Cedar Rapids, IA 52408

Phone: (319) 362-0857 – Fax: (319) 362-5243

Membership

May _____ – April _____

New Member

Renewal

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home () _____ Work () _____

E-Mail: _____

Single

Married

Spouse Name: _____

Children (18 Years or Under)

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Please fill out this form and send it with the applicable membership fee as listed below.

Family	\$300.00	Single	\$150.00
Student	\$75.00	Senior(65+)	\$150.00

- Notes:
1. Please specify on the check if the payment is for the membership dues or a general contribution.
 2. Payments can be made in installments. If you would like to have the payments automatically withdrawn from your bank account every month, please fill out the Auto Withdrawal Form.
 3. Please contact the Imam or the Chairman in case of financial difficulties regarding the membership dues.
 4. All donations are tax deductible.

Office Use Only:

Amount Enclosed: _____	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Check# _____	Date: _____
Amount Enclosed: _____	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Check# _____	Date: _____
Amount Enclosed: _____	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Check# _____	Date: _____
Amount Enclosed: _____	<input type="checkbox"/>	Cash	<input type="checkbox"/>	Check# _____	Date: _____