



Danbury Masjid | Islamic Society of Western Connecticut

Welcome to the ISWC, We have a fine group of families that have indicated willingness to help according to their abilities. We invite you also to add your commitment, talent, and interests so the best possible programs can be developed for the community for Greater Danbury.

Please print this form, complete, and send with your payment at

ISWC, 388 MAIN STREET, DANBURY, CT 06810

MEMBERSHIP APPLICATION			
APPLICANT INFORMATION			
Name:			
Phone:	E-Mail:		
Current address:			
City:	State:	ZIP Code:	
Profession:			
EMERGENCY CONTACT			
Name of a relative not residing with you:			
Address:			Phone:
City:	State:	ZIP Code:	
Relationship:			
SUGGESTED MEMBERSHIP FEE PER MEMBER			
Annual Membership Fee	\$240.00	Monthly Membership Fee	\$20.00
MEMBER PLEDGE			
Please select (<input type="checkbox"/>) pledge Amount: <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$500 <input type="checkbox"/> \$250 <input type="checkbox"/> \$100 <input type="checkbox"/> \$50 <input type="checkbox"/> \$25 <input type="checkbox"/> \$ _____	Please select (<input type="checkbox"/>) Payment Schedule: <input type="checkbox"/> Single Payment <input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly	Please select (<input type="checkbox"/>) Membership Category: <input type="checkbox"/> New Membership <input type="checkbox"/> Renewal	
VOLUNTEER WORK			
Please select (<input type="checkbox"/>) option: <input type="checkbox"/> I'm not able to volunteer at this time <input type="checkbox"/> I'm available to volunteer this time <input type="checkbox"/> Please contact me about volunteer opportunities	Please select (<input type="checkbox"/>) day your are available: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/> Other _____	Please select (<input type="checkbox"/>) Volunteer Opportunities: <input type="checkbox"/> General Maintenance <input type="checkbox"/> Remodeling Construction <input type="checkbox"/> Prayer Arrangement <input type="checkbox"/> Youth Activities <input type="checkbox"/> Adult Learning Programs <input type="checkbox"/> Islamic School Programs <input type="checkbox"/> Arabic Language Teaching <input type="checkbox"/> Quranic Reading / Tajweed <input type="checkbox"/> Other _____	
SIGNATURES			
I certify that I know and understand the content of this application signed by me and that the same are true and correct to the best of my knowledge.			
Signature of applicant:			Date:
ISWC OFFICE USE ONLY			
MEMBERSHIP # _____			
MEMBERSHIP EFFECTIVE FROM (MM/DD/YYYY):		MEMBERSHIP EFFECTIVE END (MM/DD/YYYY):	