



SankhuwaSabha Community of USA

Estd. 2016

5085 South Olathe Cir, Centennial CO 80015

Email: sankhuwaofusa@gmail.com

Nonprofit organization 501(c) (3)

Membership Form

Please fill out the form below and send it to addressed listed above. Make your check payable to SankhuwaSabha Community of USA or SSCUSA.

First Name: _____ Middle Initial: ____ Last Name: _____

Street Address: _____ Apt No: _____

City: _____ State: _____ Zip Code: _____

Phone No: _____ Email: _____

Membership Type (Please check one): _____ Family _____ Single _____ Student

For Family membership type please list all the dependants (spouse, children under the age 18)

Spouse First Name: _____ Middle Initial: ____ Last Name: _____

Child 1 First Name: _____ Last Name: _____

Child 2 First Name: _____ Last Name: _____

Child 3 First Name: _____ Last Name: _____

Child 4 First Name: _____ Last Name: _____

Do you consent to publish personal information in SSCUSA directory? Please circle one: Yes No

By signing below or sending this form electronically, I solemnly affirm my/our pledge to support and promote the purpose of SSCUSA and to work in accordance with its by-laws

Signature: _____ Date: _____

-----**For SSCUSA Official Use Only**-----

Membership Number Assigned: _____

Start/Renew Date: _____ Expiration Date: _____

SSCUSA Official: _____ Signature of Official: _____

A,Life Member (Family) \$150.00 , B ,Life Member (Single) \$100.00 , C general membership \$25.00(two- year)