



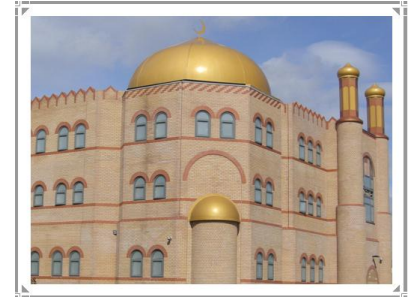
Liverpool Muslim Society AL-Rahma Mosque

Membership Application Form

29 -31 Hatherley street • Liverpool • L8 2TJ

Tel/Fax (0151) 709-2560 Charity Register Number: 503822

<http://www.alrahma-mosque.com> Email: info@alrahma-mosque.com



1. Applicant Details

Membership: New Renewal

Applicant's Name	<i>Last:</i>		<i>First:</i>		
	Date of Birth: / /	Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
	Nationality:		Are you entitled to Vote in the Local/National/European Elections? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed				

Spouse's Name	<i>Last:</i>	<i>First:</i>	<i>Age:</i>
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Children Under 18	#	Full Name	Age	Gender

Please attach an additional page if more space is needed

2. Address and Contact Information

Street Address	
City:	Post Code:

Contact Methods	1 Home	()	-
	2 Work	()	-
	3 Mobile	()	-
	5 Email		
	Preferred method of contact:		

3. Membership Fees

There is NO membership Fees but we hope you will be able to donate on a regular basis to help with the running costs and maintenance of the mosque.

4. Donations	Amount
Donation amount	£2.50/week or £10/month
<input type="checkbox"/> Other amount (Please write the amount and tick the frequency)	£ Week <input type="checkbox"/> Month <input type="checkbox"/> Year <input type="checkbox"/>

4. Payment Method	Amount
Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Standing Order	Total £

If paying by Standing Order the Account Number: 93698720 Sort Code: 60-17-08

5. Questionnaire (Optional)

In what capacity can you or members of your family help Masjid Al Rahma and the Muslim community it serves?
(Check all that apply)

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Daawah Activities | <input type="checkbox"/> Education Programs | <input type="checkbox"/> Community Relations | <input type="checkbox"/> Fundraising / Finances |
| <input type="checkbox"/> Facility Maintenance | <input type="checkbox"/> Youth / Sports | <input type="checkbox"/> Women Activities | <input type="checkbox"/> Membership Drives |
| <input type="checkbox"/> Social Activities | <input type="checkbox"/> Professional Services | <input type="checkbox"/> Website / Newsletter | <input type="checkbox"/> General Volunteer Work |

Would you consider serving as a committee member or a volunteer during the course of your membership? Yes No

Have you done community work here or elsewhere in any capacity before? Yes No, If yes, please explain:

6. Membership Requirements Liverpool Muslim Society

1. Membership

- 1.1 Membership is open to any individual or organisation interested in promoting the Objects who applies for membership in a form prescribed by the Trustees and whose application is approved by the Trustees.
- 1.2 The Trustees may establish different classes of membership, and prescribe their respective privileges and duties.
- 1.3 The Trustees must keep a register of members.
- 1.4 A member may resign by written notice to the Charity.
- 1.5 The Trustees may by resolution terminate the membership of any member on the ground that in their reasonable opinion the member's continued membership would be harmful to the Charity. The Trustees may only pass such a resolution after notifying the member in writing and considering the matter in the light of any written representations which the member puts forward within 14 clear days after receiving notice.
- 1.6 Membership of the Charity is not transferable.

2. Voting

You will only be entitled to vote if you are 18 years old and have a valid membership card.

I certify that the information I submitted is accurate and that I meet the membership requirements. By signing this application form, I agree to release LMS, its board members, officers, employees, and agents from any claims, demands of action I may have against LMS as a result of omission, rejection, suspension, or termination of my membership.

7. Signature Box (this membership form must be signed and dated)

Signature of Applicant	
Date	

For LMS use only, please don't write inside this box

Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<input type="checkbox"/> Pending	Date received:
Membership Type:	<input type="checkbox"/> Ordinary	<input type="checkbox"/> Associate	<input type="checkbox"/> Honorary	Membership ID#:
Notes:				
Full Name :				
signature:				Date: