## **PURBASHA NEW MEMBERSHIP FORM**

MEMBERSHIP SUPPORT LEV	ELS (Select One):
Family (2Adults &	2Kids) \$250 Individual \$125
Student Fami	ly \$200 Student Individual \$100
PERSONAL DETAILS:	
Name	
House # & Street Address	
City, State & Zip	
Mobile No.	
Home No.	
Email	
FAMILY MEMBER DETAILS:	
Spouse	
Phone No.	
Email	
Child 1 & Age	
Child 2 & Age	
SUBMISSION PROCESS:	
# You can send application &	check by mail to PURBASHA, PO Box 2904, Alpharetta, GA 30023
# Please make check payable t	o "PURBASHA"
# Also you can pay online at o	ur website ( <u>http://purbasha.org/#membership</u> )
SIGNATURE:	
By signing below, I agree to all	rules and regulations of PURBASHA by Laws:
Signature:	Date:
** Membership valid for 1 year from the date of payment and is non- refundable ** Rev. Dec 2018	