



# VOKKALIGARA PARISHAT OF AMERICA – EAST

IRS Tax ID 31-1529941

## MEMBERSHIP FORM - 2011

First Name : \_\_\_\_\_

Last Name : \_\_\_\_\_

Address : \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

Phone : \_\_\_\_\_

Email 1 : \_\_\_\_\_

Email 2 : \_\_\_\_\_

**(Note: Enter your Spouse Email id so that either of you can see the messages sent)**

Spouse Name: \_\_\_\_\_

Child 1 : \_\_\_\_\_

Child 2 : \_\_\_\_\_

Child 3 : \_\_\_\_\_

### Membership Type:

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Single (Annual) | <input type="checkbox"/> \$ 20.00    |
| <input type="checkbox"/> Family (Annual) | <input type="checkbox"/> \$ 40.00    |
| <input type="checkbox"/> Life (Family)   | <input type="checkbox"/> \$ 500.00   |
| <input type="checkbox"/> Patron          | <input type="checkbox"/> \$ 1,000.00 |
| <input type="checkbox"/> Grand Patron    | <input type="checkbox"/> \$ 5,000.00 |
| <input type="checkbox"/> Donations       | <input type="checkbox"/> \$ _____    |

*(Note: Life membership fee may be paid in four Installments of \$125 each, but should be within one calendar year)*

**Total Amount enclosed in the Check : \$ \_\_\_\_\_**

**Please mail this completed Membership Form along with your check to:**

**Kindly make Check Payable to "VPA-EAST"**

**Mr. Harish Kumar, Treasurer, VPA-East  
2302, Green Hollow Dr  
Iselin, NJ 08830**