

In The Name of Allah, The Most Merciful, The Most Compassionate



### Islamic Center Northridge

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## MEMBERSHIP APPLICATION FOR THE YEAR: 2023

NEW       RENEWAL       ADDRESS CHANGE       STATUS CHANGE

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

SPOUSE'S FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ SPOUSE OCCUPATION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE# \_\_\_\_\_ BUSINESS PHONE # \_\_\_\_\_ MOBILE # \_\_\_\_\_ SPOUSE MOBILE: \_\_\_\_\_

E-MAIL \_\_\_\_\_ SPOUSE EMAIL: \_\_\_\_\_

US CITIZEN: <input type="checkbox"/> YES <input type="checkbox"/> NO	PERMANENT RESIDENT: <input type="checkbox"/> YES <input type="checkbox"/> NO	ICN VOLUNTARY WORK: <input type="checkbox"/> YES <input type="checkbox"/> NO
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**CHILDREN INFORMATION (Under 18)**  
NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

**REFERRED TO ICN BY CURRENT MEMBERS:**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

I HEREBY APPLY TO BECOME AN ACTIVE MEMBER OF THE ISLAMIC CENTER NORTHRIDGE AND HEREBY PLEDGE TO SUPPORT ITS PROGRAMS AND ABIDE BY ITS RULES, REGULATIONS, AND BYLAWS.

I AND MY FAMILY MEMBERS LISTED IN THIS APPLICATION DO HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS THE ISLAMIC CENTER NORTHRIDGE, AND THE OFFICERS, DIRECTORS, MANAGERS, EMPLOYEES, AND OTHER AGENTS AGAINST ANY CLAIM, LIABILITY, LOSS, DAMAGES, OR EXPENSES OF ANY NATURE WHATSOEVER WHICH I/WE AGREE TO SUBMIT ANY AND ALL CLAIMS, DISPUTES, AND CONTROVERSIES ARISING BETWEEN ME/US AND THE ICN OR ANY OTHER MEMBER(S) IN RELATION TO THE SOCIETY, TO A FINAL AND BINDING RESOLUTION BY AN ARBITRATION PANEL COMPOSED OF THREE MEMBERS OF THE ISLAMIC FAITH, ONE SUCH PERSON TO BE SELECTED BY ME/US, ONE SUCH PERSON TO BE SELECTED BY ICN AND THIRD SUCH PERSON TO BE SELECTED BY THE FIRST TWO SUCH PERSONS SO SELECTED. I/WE AGREE THAT THE DECISION OF SUCH ARBITRATION PANEL SHALL BE FINAL AND BINDING UPON ALL PARTIES AND I/WE WAIVE ANY AND ALL RIGHTS TO RESORT TO LITIGATION IN ANY COURT OF FORUM WITH RESPECT TO SUCH CLAIMS, DISPUTES, OR CONTROVERSIES EXCEPT AS PROVIDED IN STATE OF CALIFORNIA CODE OF CIVIL PROCEDURE SECTIONS 1280, ET SEQ. I/WE PLEDGE THAT I/WE WILL OBSERVE THE ISLAMIC DRESS CODE INSIDE THE ICN FACILITIES. I/WE ALSO, UNDERSTAND THAT THE ISLAMIC CENTER NORTHRIDGE RESERVES THE RIGHT TO REFUSE, REJECT OR CANCEL THIS APPLICATION OR MEMBERSHIP AT ANY TIME.

I AUTHORIZE ICN TO MAKE PUBLIC MY: NAME: YES  NO ; ADDRESS: YES  NO ; PHONE: YES  NO ; E-MAIL: YES  NO

I CERTIFY THAT I AM AN OFFICE BEARER OR AN EMPLOYEE OR A PARTICIPANT IN THE OPERATION OR MANAGEMENT OF ANOTHER ISLAMIC NON-PROFIT ORGANIZATION WHOSE SOURCE OF REVENUE IS DONATIONS FROM MUSLIMS. YES  NO

YOUR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ /SPOUSE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ :

YEARLY DUES = \$100 /AMOUNT PAID: \$ _____ <input type="checkbox"/> CASH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> ZELLE <input type="checkbox"/> CHECK # _____ DATE: _____ <i>( Regular Membership: Husband &amp; Wife \$100, Single \$50, Student \$25, Charter Membership: Husband &amp; Wife \$1000, Single \$ 500)</i>
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### FOR OFFICE USE ONLY

APPROVED AS:  REGULAR MEMBER  CHARTER MEMBER  NOT APPROVED. REASON: \_\_\_\_\_  
*(Reason for not Approved)*

SIGNATURE: \_\_\_\_\_ NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ CR#: \_\_\_\_\_

## RECEIPT

RECEIVED ICN 2023 MEMBERSHIP APPLICATION FROM MR & MRS./ MS. \_\_\_\_\_

ALL SECTIONS COMPLETE:

MEMBERSHIP DUES PAID AS:  CASH  CREDIT CARD  ZELLE  CHECK NO.: \_\_\_\_\_

SIGNED BY ICN SECRETARY/ACCOUNTANT: \_\_\_\_\_ DATED: \_\_\_\_\_