

TAMIL SANGAM OF GREATER WASHINGTON, INC

(A Registered Non-Profit Cultural and Secular Organization) 1642 COLONIAL HILLS DR. ,MCLEAN VA 22102 E-mail: tamil.sangam@gmail.com Web: www.washingtontamilsangam.org

MEMBERSHIP APPLICATION – 2016

Name of the member:		
	(Last name)	(First name)
Name of the Spouse:	(Last name)	(First name)
Mailing Address:		
Telephone No:		
	(Home) / (Cell)) (Work -optional)
E-mail Address:		
Membership: (Please, checl	< appropriate boxes)	
□ □ Family \$ 35/annual	Family Life Membersh □ S	n ip - \$500 Single \$ 25/annual
Payment: □Cash	Check No:	Credit Card
Name(s) of the family memb	per: (for family membersh	ip only)
1)Ad	lult/child 2)	Adult/child
3)Ad	lult/child 4)	Adult/child
Interest of members: (If yo		or contribute in any of the following areas,
please specify) Tamil class Cultural programs	 Youth activities Literary meetings 	☐ Thenral Mullai Magazine ☐ Any other :

Signature:

Date:

Please fill this form, make your check payable to <u>Tamil Sangam of Greater Washington, Inc.</u>, and mail along with your check to:

Dr. VIJAYAKUMAR MUTHUSAMY, 1642 COLONIAL HILLS DR. ,MCLEAN VA 22102. OR

To update your membership information and pay your dues online, please visit www.WashingtonTamilSangam.org/members