



Hindu Temple Society of the Capital District, Inc.
Loudonville, NY 12211

Membership Application Form-2016

Tel: 518-459-7272 • www.albanyhindutemple.org

Date: _____

Check one: Family Individual (For Family Includes Both Names in the house)

Name: _____ Spouse : _____

Address: _____

Phone: _____ Email: _____

Email address of kids older than 21 (Optional) _____

Newsletter: Do you currently receive newsletter: Yes No

If not would you like to receive it Yes No

Membership: Have you been a member previously: Yes No

Select one:* Wish to be a Voting Wish to be Non-voting member

1. Beginning 2010, it is essential to become a member by January if you wish to contest the election that are held during November of the calendar year. Any membership forms that are received later than January will not be able to contest the election , but will be eligible to vote based on meeting the requirements of the constitution and will also be enjoy the other benefits of membership that are listed below.
2. * If you do not reside within 100 miles of the Temple premises, please consider becoming a non-voting member to simplify meeting quorum requirements. Nonvoting member has all the rights and privileges, but cannot vote in the elections or on any resolutions brought before the General Body for its approval. You can become a voting member at a later date by sending a written notification to the Temple.
3. Any person over the age of 18 years who shares and promotes the ideals and goals of HTS shall be eligible for membership, irrespective of color, creed, caste, nationality, or gender without any restriction.
4. A member is in good standing when his/her membership application has been submitted and approved by the membership committee, and dues and assessments, if any, for the current year are paid at least five weeks before the annual election meeting.

Membership Benefits: 10% discount on Temple & CC Booking, House Poojas, Temple Camp discount., Heritage Class.

Check the temple website for deals and discounts with our partners.

Receipt Number (Required only if annual member)

Membership Category (Please check one) Life Member- \$5000/paid in 5 years. Annual-\$100/year (Single)

Annual-\$150/year (Couple)

First Member Signature

Second Member Signature

Please make **check payable to: Hindu Temple Society**

Mail check and application to: **Hindu Temple Society**

P O Box 11650

Loudonville, NY 12211

Or you can also drop it off at the Temple in the drop- box at the front desk, if you prefer. Any questions, **contact the membership secretary at 518-429-5237** or any of the trustees.

----- FOR OFFICE USE ONLY -----

Membership application APPROVED NOT APPROVED

Signed by: _____

Chair, Membership Committee