

## **Muslim Community Association of Ann Arbor and Vicinity**

2301 Plymouth Road, Ann Arbor MI 48105 Phone: (734) 665-6772, Web: <u>www.mca-a2.org</u>

## Membership Application/Renewal Form

Name:						
I	First Name	Middle Name			Last Name	
ddress:						
(	Number	Street	Apt#	City	State	Zip)
Phone:			E-mail:			_
		Marital Status:	SINGLE	MARRIED		
	Spouse:	E-mail:		nail:		
Children:						
1. Child	lren under the	age of 15 can apply	with their paren	ts' membership	application.	
2. Child	lren between 1	5-21 years are expe	ected to fill out a	separate applica	ition form.	
						_
Name		DOB		Email		Gender
		DOD		Б 1		G 1
Name		DOB		Email		Gender
Reference 1:						
	First Nan	ne l	Last Name		Phone Number	
Reference 2:	-					
	First Nan		Last Name		Phone Number	
mergency Co	ntact:					
		First Name	Last 1	Name	Pho	one Number
`hree-Year M	• 9	Free – Individuals t 675 – Individuals & 6150 – Families		, .		
New Member:	YES NO	) (	Current Monthly	y Pledger: YE	S NO	
Would you like to be included in th			e MCA email list?		YES	NO
lease check the	following boxe	s:				
I am Musl	im & ascribe t	to the teachings of (	Quran & Sunnah	as understood by	y Ahl-us Su	nnah wal Jama'a
I have incl	uded a copy o	f my photo ID for v	verification of my	postal address	and my age.	
S	Signature:		Date:			