

Brahmin Society of New York
Membership Application
 269-11 79th Avenue, New Hyde Park, NY 11040

WWW.BSNY.ORG

FOR OFFICE USE ONLY		
Received \$	Check #	Date:
Receipt #		Date:
Treasurer:		
Trustee:		

I wish to become a member of the Brahmin Society of New York for the year: _____

MEMBERSHIP: PATRON ⇨ \$251.00

LIFE ⇨ \$151.00

Please make all checks payable to "BRAHMIN SOCIETY OF NEW YORK"

➤ Please note: All yearly membership are effective from January 1st to December 31st retroactively

Name: _____	Family Gautra: _____
Address: _____ _____ _____	Native Place: _____
Home #: _____	Work/Cell #: _____
	Email: _____

Name	Relation	Birthday	Education	Occupation	Marital Status

I understand that I have voluntarily supplied the above information and it may be used for the benefit of the Brahmin Society of New York and its member at any time.

Signature of Applicant: _____

Date: _____