



INDIA CULTURAL ASSOCIATION OF CENTRAL JERSEY

ESTABLISHED - 1982

A Non-Profit & Tax-Exempt Organization

MEMBERSHIP FORM

www.icaofcj.org

(January 1st to December 31st)

DATE: ____/____/____

PERSONAL INFORMATION:

Old Membership # (If any): _____

First Name	Last Name	Relationship	Male Female Mom Dad Son Daughter	Date of Birth mm/dd/yyyy	Signature (if 18 years or older)
		Self			
		Spouse			

List below parents and unmarried children living with you. DO NOT INCLUDE BROTHERS / SISTERS

ADDRESS:

STREET: _____ APT# _____

TOWN: _____ PHONE #: (____) _____ - _____

STATE: _____ ZIP CODE: _____ e MAIL: _____

***You Prefer Correspondence

via email: ☐

Postal Mail: ☐

-----: **Do Not Write Below This Line:** -----

<u>MEMBERSHIP DUES</u>	<u>ASSOCIATION USE ONLY</u>
Five Years \$100.00 Lifetime \$300.00	Date Received : ____/____/____
<u>Send Completed Form TO :</u>	Change of Address: YES <input type="checkbox"/> NO <input type="checkbox"/>
ICA OF CJ	Membership # _____
C/O Kamlesh Shah	NEW : <input type="checkbox"/> RENEWAL : <input type="checkbox"/>
18 Lovell Drive	Check # _____ Amount : \$ _____ .00
Plainsboro, NJ 08536	Initial : _____ Date ____/____/____

*** Disclaimer: We do not Share/Sell any of your Personal information including email address

Form Updated: March 2024