



# Satsang Canada (Registered)

## Application for Annual Membership

### Personal Information

Name	_____	Initiated	<input type="checkbox"/>	Swastayani	<input type="checkbox"/>
Spouse	_____	Initiated	<input type="checkbox"/>	Swastayani	<input type="checkbox"/>
Children	_____	Initiated	<input type="checkbox"/>	Swastayani	<input type="checkbox"/>
	_____	Initiated	<input type="checkbox"/>	Swastayani	<input type="checkbox"/>
	_____	Initiated	<input type="checkbox"/>	Swastayani	<input type="checkbox"/>

Address \_\_\_\_\_

Contact Number and Email \_\_\_\_\_

Membership fee payment (non-refundable) can be paid by cash/cheque. If paying by cheque then it should be drawn in favor of "Satsang Canada".

Annual Membership Fees (\$ 25 per person)

Payment Ref

Membership Applicant Name \_\_\_\_\_

Recommended By \_\_\_\_\_

I have understood the goals and objectives of "Satsang Canada Inc.", and would like to contribute to the best of my ability for the benefit of the organization.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Please duly fill, print and post the membership form to the address given below with cheque:  
**38 Sedgewick Circle, Brampton, Ontario. L7A 2P7. Tel: (905) 450-6074**