



Please fill out this form on your computer for data accuracy
Gujarati Samaj Of Tampa Bay - 2020
Membership Form

Membership valid from 1/1/2020 thru 12/31/2020
GSTB is a Non Profit 501(c)3 Organization: Tax ID: 59-2657408

Primary Member's Name & Address:

Mark One: First Time Membership Renewal

(Please use CAPITAL Letters)

AS PER BY-LAWS of GSTB:

- a. Membership Fees are not transferable or refundable. Age as of 01/01/2020
- b. Payments after 31st Jan 2020-PAY EXTRA \$10/= per person.
- c. ALL members acknowledge & accept the terms & conditions of GSTB By-Laws.
- d. There may be nominal charge for some events to members.
- e. **Date of Birth is required field.**

Primary Phone # (Will be Published): _____

Alternate Phone # _____

E-mail Address: _____

Alternate E-Mail Address: _____

Last Name Below	Relationship	e. Date of Birth	A	B	C	D
First Names Below Or First & Last Name if different Last Name than above		MM/DD/YYYY	Adults Age-18 to 64 \$75	Seniors Age-65 & Up \$50	Child >5 Age-5 to 17 \$50	Child <5 Age-1 to 4 \$0
Please add \$10/member if paying after 01/31/2020						
	Primary Member (Self)					\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00

Office Use Only: Cash: _____ Check: _____ Cr. Crd: _____
 Amount Received: \$ _____ Receipt/Check #: _____
 Date Received: _____ Bank: _____
 Received By: _____
 Member # **6M-** -

Total:				\$0.00
Total Membership Dues:				

ALL members acknowledge & accept the terms & conditions of GSTB By-Laws. Copy of GSTB By-Laws available @ www.gujaratisamajtampabay.com

Important: If you pay by cash then you are responsible to save your receipt as proof of membership & present it in the future if asked.

Credit Card payment will be accepted with nominal convenience fee.

Please add \$10/member if paying after 01/31/2020

Make Payments to: GSTB & mail to:

Gujarati Samaj Of Tampa Bay
 Attn: President, 2020
 7860 Tuscany Woods Dr.
 Tampa, FL 33647

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Office Use Only: Membership Fees are not transferable or refundable **Receipt**
Age as of 01/01/2020

Received From: _____
 Received By: _____ Date: _____
 Amount Recd.: _____ Check/Cash/Credit: _____
 Receipt #: _____

Member #: **6M -** -

For membership questions, contact Keval Brahmhatt @ 813-494-2700 Kevalb@Gmail.com