



Jain Society of Metropolitan Chicago

(A non-profit tax exempt organization. Tax ID: 51-0175101)

435 N. Route 59, Bartlett, IL 60103

Phone: (630) 837-1077

Website: www.jsmconline.org

Event Participation Application

Member's Name: _____ Life Membership ID: _____

Address: _____

Phone: (H) _____ (M) _____

E-mail: _____

I hereby agree to pay following donations for the events listed below:

| No. | Event Date | Event | Donation | Comments |
|-----|------------|-------|----------|----------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

Note:

1. Please submit one application form per family.
2. Please submit completed form prior to event to confirm participation.
3. Completed application is a MUST for payment verification & accounting.
4. If making payment on behalf of someone, please indicate above mentioned Member's Name on check memo.
5. Please submit completed to **Religious Secretary**.

Member's Signature: _____

Date: _____

For office use only:

Application received on: _____

Application approved on: _____ Approved by: _____

Member notified with participation/receipt on: _____