



SRI SHIRDI SAIBABA TEMPLE

28875 W Seven Mile Rd, Livonia-MI-48152

(A non-profit organization Tax ID: 32-0064813)

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<http://www.saibabami.org>

DONATION/ MEMBERSHIP FORM

Family/Last Name: _____ First Name: _____ MI: _____

Spouse Last Name: _____ First Name: _____ MI: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____ Home Phone No.: _____

Are You above 21: Yes No

Day of Choice for Archana: _____ (Life Members Only):

Gothram: _____ Birth Star: _____ Zodiac: _____

Donation Amount:

\$

All the donations go to the operations and improvement of Sri Shirdi Sai Baba Temple. We Appreciate your generous support and your voluntary services. Please contact anyone of Samsthan committee members for further information.

General Donation; **Membership:** Yearly: \$251 (expires Dec 31st) Life Member: \$1116

Payment Method:

CASH CHECK (payable to "Shirdi Sai Samsthan, MI") Check Nbr: _____ Date: _____

CREDIT CARD Master Card Visa Discover Amex

_____ Exp Dt: Security Cd

If your donation is above **\$1116**, you are entitled to become a Life Member. To opt in, check below

Yes, I do wish to become a member

Member Consent & Signature (Mandatory); I certify to the best of my knowledge that all information provided is accurate.

Signature: _____ Date: _____

Donations are 100% Tax Deductible under IRS section 501(C)(d). Tax ID 32-0064813. Please consult your tax advisor for details and eligibility.