ZOROASTRIAN ASSOCIATION OF GREATER NEW YORK

MEMBERSHIP FORM

WEB: www.zagny.org | FACEBOOK: facebook.com/zagnyusa | TWITTER: twitter.com/_zagny

Name: _____ _____ _____ _____

Last Name *First Name* *Middle Name* *Name of Spouse*

Email: _____ _____

Self *Spouse*

Membership Type

Get 10% discount when you sign up for 3 Yrs

Family:	☐ 1 Yr @ $200.0	☐ 3 Yrs @ $540.0
Individual:	☐ 1 Yr @ $100.0	☐ 3 Yrs @ $270.0
Senior Couple:	☐ 1 Yr @ $200.0	☐ 3 Yrs @ $540.0
Senior Individual:	☐ 1 Yr @ $100.0	☐ 3 Yrs @ $270.0
Student:	☐ 1 Yr @ $40.0	☐ 3 Yrs @ $108.0
Non Resident:	☐ 1 Yr @ $50.0	☐ 3 Yrs @ $135.0

Lifetime - Couple: ☐ @ $4,000.0

Lifetime - Senior Couple: ☐ @ $3,000.0

Lifetime - Senior Single: ☐ @ $2,000.0

In case of Financial Hardship please contact vicepresident@zagny.org

Donate to Funds

General Fund: $ _____

Scholarship: $ _____

Critical Assistance: $ _____

Library: $ _____

Student Activities: $ _____

Billing Details

Membership: $ _____

Donation: $ _____

Total via Check: $ _____

Check # _____

Membership Categories

Family: Parent(s) and Children under 18 years
Individual Adult: Non-STUDENT 18 to 64 years
Senior Citizen: 65 years and older
Student: 18-25 year Enrolled Full-Time
Non-Resident Family: Residing outside the Tri-State Area of NY, NJ and CT.

Please make checks payable to ZAGNY and mail along with this form to:

Rushad Cassad
ZAGNY Treasurer
23 Emmet Ct.
Piscataway, NJ 08854