



Florida Hindu Organization Inc./ Shiva Mandir

Non-Profit Organization

Membership Form

Member Information:

- Full Name: _____
- Address: _____
- City, State, ZIP: _____
- Phone: _____ : Email: _____
- Occupation: _____ : Special Skills: _____

Membership Type & Fees

- Annual Membership Per Person – \$50.00
- Lifetime Membership Per Person – \$1000 (Effective thru 12/31/26)
- Lifetime Membership Family – \$2000 (Parents & Young Kids) (Effective thru 12/31/26)

I hereby apply for financial membership to the Florida Hindu Organization Inc. and pledge that I am of good character and will abide by the Articles of Incorporation, the Bylaws and all rules of the organization. I am aware that this is a religious, cultural and non-profit organization and I join it on my own free will. I further always pledge that I will work for the upliftment of this organization. I shall endeavor to do my best for the propagation of Hinduism at the Shiva Mandir.

Date: _____ day of _____ 20_____ in the state of Florida.

Signature: _____

Please bring completed application with payment to the temple or mail with payment to:

Florida Hindu Organization Inc:

PO Box 9003 Ft Lauderdale FL 33310