



# India Society of Worcester

## 2010 Membership Application / Renewal

Membership is valid from January to December.  
 Required fields are marked with an "\*". Please Print.

### SELF

First Name* (Mr / Mrs / Ms)		Last Name *	
Street Address*			Apt
City*	State	Zip*	
Home Phone	Unlisted Phone (for ISW Official Use only)		
Profession	Company Name		
Email	Work Phone		

### SPOUSE

First Name (Mr / Mrs / Ms)	Last Name
Profession	Company Name
Email	Work Phone

### DEPENDENTS

Name (Specify Last Name if different)	Sex (M/F)	Birth Year	High School / University	Email

### MEMBERSHIP DUES

<input type="checkbox"/> <b>Annual Membership</b> <input type="checkbox"/> Family/Single \$25 <input type="checkbox"/> Student \$10   X ___ years = \$ _____ <input type="checkbox"/> <b>Life Membership</b> \$500	Date  Payment : <input type="checkbox"/> Cash <input type="checkbox"/> Check
<b>Please make check payable to India Society of Worcester &amp; mail to:</b> <b>ISW, PO Box 945, Worcester, MA 01613</b> Membership is valid from January to December. For membership information and ISW's privacy policy please visit <a href="http://iswonline.org">iswonline.org</a> or call the President.	