Manitoba Islamic Association
www.miaonline.org

MEMBERSHIP APPLICATION FORM

Applicant Information

First Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Last Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Date of Birth:

Birth Year	Birth Month				Birth Day
|__|__|__|__|	☐ Jan ☐ Feb ☐ Mar	☐ Apr ☐ May ☐ Jun	☐ Jul ☐ Aug ☐ Sep	☐ Oct ☐ Nov ☐ Dec	|__|__|

Gender: ☐ Male ☐ Female

Email: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Phone: |__|__|__|-|__|__|__|-|__|__|__|__|

Address: House Number: |__|__|__|__| Unit Number: |__|__|__|__|

Street Name |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

City: ☐ Winnipeg ☐ Brandon ☐ Thompson ☐ Portage La Prairie

☐ Other: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Postal Code: |__|__|__|-|__|__|__|

Spousal Applicant Information

First Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Last Name: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Date of Birth:

Birth Year	Birth Month				Birth Day
|__|__|__|__|	☐ Jan ☐ Feb ☐ Mar	☐ Apr ☐ May ☐ Jun	☐ Jul ☐ Aug ☐ Sep	☐ Oct ☐ Nov ☐ Dec	|__|__|

Gender: ☐ Male ☐ Female

Email: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Phone: |__|__|__|-|__|__|__|-|__|__|__|__|

Declaration of Faith

I hereby declare that I am Muslim and that there is no god but Allah and Muhammad (p.b.u.h.) is the last prophet of Allah. I hereby declare that I am a resident of the Province of Manitoba and I wish to apply for membership of the Manitoba Islamic Association for the year 20__. I promise to abide by its rules and regulations.

Applicant Signature	Spousal Signature*
X:_____	X:_____

Office Use Only: Payment

Number of Applicants	Membership Fee	Total Amount	Payment Type	Date Received
|__|	$30	$____	☐ Cash ☐ Cheque	|__|__|__|__|-|__|__|-|__|__|

* The spousal signature must be signed by the spouse when the spousal applicant information is completed.