

Chh Gam Patidar Samaj Membership Form

Is this data new? _____
Is this data revised? _____

Native Gam: _____

First Name _____ Middle Name _____ Last Name _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ E-Mail: _____

Spouse's Name: _____ Spouse's Native Gam: _____

Un-married Children Data

Name	Sex (M/F)	Date of Birth (MM/DD/YYYY)	If attending College, What is the Major?

If you wish to become a member of CGPS of N.E. USA, please send the membership fee and sign your name below. Membership period starts **EVERY YEAR** on July 1st and ends on June 30th following year.

Membership Fee: \$ 20.00 Payable in **U.S. CURRENCY ONLY** with this form for Annual Family Membership. (Make check payable to **Chh-Gam Patidar Samaj**) You may also contact Sandip Desai at 732-819-7240 if you require further assistance or e-mail us at help@chhgamsamaj.com

Disclaimer: I hereby apply for membership of the CGPS of N.E. USA, and will abide by all rules and by-laws of the Samaj.

Signature: _____ Date: _____

Please Mail Completed Form and Fee to the Following address:

Chh Gam Patidar Samaj
Attn: Sandip Desai
7 Brotherhood Street
Piscataway, New Jersey. 08854 USA

Please visit us on our website at www.chhgamsamaj.com