



# Central Scotland Islamic Centre

Burghmuir Road, Stirling FK7 7NZ. Tel: 01786 474324

## Application for Membership

Full Name .....

Membership No.

Profession .....

Address: .....

Marital Status: Married  Single

Telephone No: Home .....

Business .....

Mobile .....

Email: .....

Proof of I.D./Residency (e.g. Utility bill, Council Tax form, Driving Licence etc.)

Declaration:

I declare that I am Muslim, and the information I provide in the application, to the best of my knowledge, is true/correct and complete.

Applicant's Signature .....

Date .....

Completed forms should be returned to:

*General Secretary*

For office use only

Applicant accepted Yes  No

Signature..... Date.....