

Kerala Hindus of North America

Application for Life Membership

Life Membership



Name of the Applicant		
Address		
Phone Number	<i>Home:</i>	<i>Mobile:</i>
Email Address		
Native place (City, District, State)		
Name of Spouse (if married)		
<p>Eligibility:</p> <p>i. All members shall have attained the age of 18 and shall belong to Kerala Hindus or their descendants sharing the objectives of KHNA and abiding by the Articles of Incorporation and the bylaws of KHNA.</p> <p>ii. Membership application form must be accompanied by the prescribed fee using a personal check or a credit card, accepted by KHNA, issued in the name of the applicant.</p> <p>iii. The applicant must be in 'Good Standing' and shall not have any financial dues with KHNA.</p> <p>iv. Husband and wife are eligible for individual membership and must submit separate application.</p> <p>Responsibilities:</p> <p>(i) If required, serve in the election committee appointed by BOT</p> <p>(ii) Participate in GB for making/revising KHNA policies</p> <p>(iii) Review the annual/biennial budget and actively participate in making financial decisions.</p> <p>(iv) If invited, serve in the KHNA advisory board</p> <p>Membership Dues:</p> <p>Life Membership Dues is \$1000 (One Thousand USD) payable using a personal check or a credit card, accepted by KHNA, issued in the name of the applicant.</p>		

Fee Paid by **Check** **Zelle** **Credit Card**

Payments can be sent to the KHNA Treasurer using Zelle: **khnasilver2025@gmail.com**

I would like to apply for the Life Membership of KHNA and certify that I meet all eligibility conditions specified in the KHNA bylaws. I hereby affirm that I subscribe to the aims and objectives of KHNA and agree to abide by the constitution and bylaws of KHNA.

Signature

Date

FOR OFFICE USE ONLY					
Date Received		Payment		Rcvd by	

Email the completed form to **secretary@namaha.org**.