



## MEMBERSHIP FEE IS \$50.00\* FOR NEW OR RENEWING MEMBER(S)

Name: .....  
Last First MI

Telephone: Home (.....)..... Cell: (.....).....

Work (.....)..... E-Mail:.....

Address: ..... Apt. # .....  
Street

..... Texas .....  
City State Zip Code

### Credit Card Payment:

Visa, Master Card, Discover, American Express and Others

Name: .....

Credit Card Number: .....

Expiration date:...../...../.....

Please write the area or areas you would like to help ISF with;

1. ....
2. ....
3. ....

Signature: ..... Membership Date:...../...../.....

*\*Membership fees are not deductible as charitable contributions*

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### Islamic Services Foundation (ISF)

ISF MAIL: P.O. Box 451623, Garland, Texas 75045  
ISF OFFICE: 411 INDUSTRIAL RD, SUITE # 105, RICHARDSON, TX 75081  
972-414-5090 • 469-453-3200 • INFO@ISLAMICSERVICES.ORG  
[WWW.ISLAMICSERVICES.ORG](http://WWW.ISLAMICSERVICES.ORG)