JAIN SOCIETY OF TORONTO INC.

[Formerly functioning as Jain Society of Toronto since 1974]

Location: 441 Ellesmere Road, Toronto, ON M1R 4E6 Canada
Mail: PO Box 62615, Parkway Mall, 85 Ellesmere Road, Toronto, ON M1R 5G8
Tel. 416-441-2211 email: secretary@jsotcanada.org web: www.jsotcanada.org

CURRENT LIFE MEMBERS INFORMATION UPDATE FORM

Fields marked with asterisk are required;*

LMN#

(Office use only)

NAME: *_____ DATE OF BIRTH: *_____
Surname (Last Name) *Given Name(s)* *Month-Year MMM-YYYY*

M ☐ F ☐ Married ☐ Single ☐

SPOUSE NAME: *_____ DATE OF BIRTH: *_____
(If applicable) *Month-Year*

ADDRESS: *_____

CITY: *_____ PROVINCE: *_____ POSTAL CODE: *_____

PHONE: *_____ CELL PHONE: _____ WORK PHONE: _____

E-MAIL 1: *_____ E-MAIL 2: _____

PROFESSION: _____ PROFESSION OF SPOUSE:_____

DEPENDENTS (18 years or younger): For more dependents, under 18 years, please attach another copy of this form.

NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____

NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____

NAME: _____ RELATIONSHIP: _____ DATE OF BIRTH: _____

Consent to add your name to JSOT directory, newsletter, and other published publications periodically:* Yes ☐ No ☐

Please mail completed application form to the address in the header or email to membership@jsotcanada.org or drop off in mail box outside the JSOT office.

*SIGNATURE OF APPLICANT** *SIGNATURE OF SPOUSE** Date* (DD-MMM-YYYY)

Co-chair, Membership Committee Date (DD-MMM-YYYY)