

Exhibit II  
Hindu Temple of Arizona

3019 N. Hayden Road Scottsdale, AZ 85251

**Active Membership Application**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Spouse First Name: \_\_\_\_\_ Spouse Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Member Type:     Single             Family             Corporate

**Membership Category (please circle one)**

- LIFE MEMBER donates \$1000 to \$2000
- FOUNDER MEMBER donates \$2001to \$5000.
- PATRON MEMBER donates \$5001 to \$15000.
- GRAND PATRON MEMBER donates \$15,001 to \$30,000.
- BENEFACTOR MEMBER donates \$30,001 to \$50,000.
- GRAND BENEFACTOR MEMBER DONATES \$50,001 ONWARDS.

By signing below, I certify that I intend to **participate in** the HTA's business activities. I will do my best to attend the Annual Members' Meeting, Special meetings, and the election of Board members.

**Validity** time from the signed date (please circle one)

For one Year \_\_\_\_\_ , two Years \_\_\_\_\_. For Five Years \_\_\_\_\_

The application shall be sent to the Secretary of the HTA. An active member may modify this selection by sending the modified application to the Secretary of the HTA

Signature \_\_\_\_\_

Self

Spouse

Date: \_\_\_\_\_