

ISLAMIC ASSOCIATION OF NW CALGARY

7750 Ranchview Drive NW #23, Calgary, AB T3G 1Y9

Website: ianwc.ca; Tel: (403) 460-5725 email: admin@ianwc.ca



APPLICATION FOR MEMBERSHIP (Regular Member)

To: Board of Directors,
Islamic Association of NW Calgary

Please accept my membership application for Islamic Association of NW Calgary. I confirm that I am a Muslim, Citizen, or Permanent Resident of Canada, at least 18 years of age and reside in the North-West quadrant of the city of Calgary, extending West of Deerfoot Trail and North of Memorial (East of Shaganappi) and Highway 1 (West of Shaganappi Trail) and that I meet the membership application criteria as outlined in the Bylaws of Islamic Association NW Calgary. I also do understand that this application must be approved by the Board of Directors before I can exercise my rights to vote. Dated _____, 2023.

Applicant Name (please print)

Applicant Signature

Address

City/Postal Code

Telephone

E-mail _____

(If checked, I consent to receiving communications from IANWC/ MAC/MCFC/MCC by email)

Recommended by the following (must be completed by two (2) valid existing members):

Member Name (please print)

Member Signature

Member Name (please print)

Member Signature

ISLAMIC ASSOCIATION OF NW CALGARY

7750 Ranchview Drive NW #23, Calgary, AB T3G 1Y9

Website: ianwc.ca; Tel: (403) 460-5725 email: admin@ianwc.ca



Office use

Fee Received: (may vary from time to time)

Details Complete:

Entered into Membership List:

Membership application for Islamic Association NW Calgary 2023-24