



ALBANIAN MUSLIM SOCIETY OF TORONTO INC.
SHOQËRIA SHQIPTARE ISLAME E TORONTOS
ADDRESS: 564 ANNETTE STREET TORONTO, ON, M6S 2C2
TEL: (416) 763-0612
E-MAIL: XHAMIA@ALBMUSLIM.CA | WEB: WWW.ALMUSLIM.CA

Membership Application Form

Formulari i Aplikimit për Anëtarësim

Section 1 – Primary Applicant / Aplikuesi Kryesor (Kryefamiljari) Extended member Regular member

Title / Titulli	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/>	Other (please specify) Tjetër (ju lutemi Specifikojeni)									
First name / Emri		Family name / Mbiemri									
Date of Birth / Data e Lindjes	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Gender / Gjinia	Male / Mashkullore <input type="checkbox"/> Female / Femërore <input type="checkbox"/>
D	D	M	M	Y	Y	Y	Y				

Section 2 – Address details / Detajet e Adresës

Address / Adresa			
City / Qytetit		Province / Provinca	
Postal Code / Kodi Postar		Country / Shteti	
Telephone Number / Numri i Telefonit			
E-mail			

Section 3 – Family members information / Informacionet e anëtarëve të familjes

First Name and Last Name / Emri dhe Mbiemri	Relationship to Applicant / Lidhja Familjare me Aplikuesin	Date of Birth / Data e Lindjes

Section 4 – Payment Details / Detajet e Pagesës

Payments can be made online at www.albmuslim.ca / Pagesat mundet të bëhen Online në: www.albmuslim.ca

<input type="checkbox"/>	Cash	\$	
<input type="checkbox"/>	Cheque	\$	Cheques must be made payable to: <u>Albanian Muslim Society of Toronto Inc.</u>
<input type="checkbox"/>	Credit Card	\$	Please fill up Credit card details / Ju lutemi plotësoni detajet e kartës së Kreditit

Visa MasterCard Amex Other _____

Card Number

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Card Expires ON

M	M	Y	Y
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Card Security Code (CVC)

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Applicant Signature /
Nënshkrimi i Aplikuesit

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Date /
Data

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