In the name of Allah, the Beneficent, the Merciful

Northern Nevada Muslim Community (NNMC)

Location:
1857 Oddie Blvd
Sparks, NV 89431

(775) 351-1857

Mailing Address:
P.O. Box 1238
Sparks, NV 89432

General

1. Only a completed membership package per person shall be considered. A membership package refers to an envelope containing the following:
a. Membership application
b. Check or money order for the membership fee. Cash is highly discouraged.
c. Copy of a valid Nevada ID
d. Copy of student ID if claiming student status

2. Envelopes of completed packages can be either dropped in one of the membership collections boxes at the mosque or mailed to NNMC P.O. Box. 1238 Applications shall not be handed to any board members to avoid any mishandling.

3. Once approved, new membership cards shall be mailed to the members at the address provided. There will be no distribution of membership cards in the mosque.

4. Members from the same family and living together can combine their complete package in one envelope and pay with one check.

5. Life membership payment must be paid in full within one (1) calendar year.

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Biennial NNMC Membership Application (Renewal 2023-2024) / Life Membership Form

Last Name*: _____ First Name*: _____

Mailing Address*: _____

_____

Telephone*: _____ Fax: _____

Email**: _____

Occupation: _____

* Required Fields. Applications without a full name, mailing address, DL/NV ID, and phone number will not be processed.

** Providing an email is highly encouraged to facilitate communication.

Membership Fee	$25 (per student)	$60 (per person)	$40 (Spouse)	$50 (each additional family member)	$5000 (per person Lifetime) ***
Donation	$	$	$	$	$
Total	= $	= $	= $	= $	= $

*** Attach the payment details for installment payments made within one calendar year.

Please initial:

____ I certify that I am a Muslim of age 16 years or older whose beliefs are in accordance with the Quran and Sunnah.

____ I live in Northern Nevada (proof is required for all members)

____ I accept to abide by the Constitution and Bylaws of NNMC. I understand that my membership can be revoked or canceled any time I am found, by the executive board, in noncompliance with the Constitution and Bylaws of NNMC.

____ I understand I have to maintain my membership to keep my benefits such as, but not limited to, voting, serving in office, door access, etc.

Complete applications submitted by September 1, 2023, will be eligible to vote and run for office for January 1st, 2024 - December 31st, 2025 term.

Signature: _____ Date: _____

Suggestions and comments are always welcomed