



THE ISLAMIC CENTER
OF PITTSBURGH

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IN THE NAME OF GOD, THE MERCIFUL, THE BENEFICENT

Year _____

2011 ICP Membership Application

ICP Members receive discounts on classes, events, tickets and more. Members also get exclusive opportunities to vote in ICP elections and proposals.

Join today and make your voice heard!

PLEASE PRINT (members must be 18 or older)

Last Name	First	MI	Occupation:
			Email:
Last Name	First	MI	Occupation:
			Email:
Last Name	First	MI	Occupation:
			Email:
Last Name	First	MI	Occupation:
			Email:
Street Address			Home Phone
City	State	Zip Code	Membership Type New Renewal

Volunteer Information:

The ICP and your community need your help. Offering your time and personal service is considered by Allah (swt) to be a Sadaqah (charity). Please do not hesitate to volunteer your time. By providing us with your current email address and phone number above, you will be notified when volunteering opportunities becomes available.

What are you interested in helping with?

- | | |
|---|---|
| <input type="checkbox"/> Office Work (calls, mailing, folding and etc.) | <input type="checkbox"/> Organizing the Library |
| <input type="checkbox"/> Food Bank | <input type="checkbox"/> Helping at events (picnics, dinners) |
| <input type="checkbox"/> Driving | <input type="checkbox"/> Youth Program |
| <input type="checkbox"/> Donation Center | <input type="checkbox"/> Cooking for event |
| <input type="checkbox"/> Summer Program | <input type="checkbox"/> Weekend School |
| <input type="checkbox"/> Gym/Fitness Programs | <input type="checkbox"/> Summer Camp |
| <input type="checkbox"/> Education Programs | <input type="checkbox"/> Renovations |
| <input type="checkbox"/> Dawah/Outreach | <input type="checkbox"/> Other: _____ |

Payment: Please make all checks payable to **The Islamic Center of Pittsburgh**. You may also pay via the web by using your PayPal account or your Visa, MasterCard and American Express just go to **icp-pgh.org** and donate.

Membership (\$20.00 per person) \$ _____
 Optional Contribution/Donation \$ _____
 Total \$ _____

For official use only:	
Payment recvd	
Payment type	
Date & Initial	

Signature: _____ Date _____