



MAITRI MEMBERSHIP AND RENEWAL FORM

A non-profit 501(c)(3) Tax Exempt Organization – EIN # 92-2315704, Phone: 281-216-4883

Email: maitriinhouston@gmail.com Online Membership: <https://maitri-houston.org/membership/>

Donation through Zelle: Business Name: Maitri In Houston, Business Email: maitriinhouston@gmail.com

Please mail this membership form (w/ check made payable to “MAITRI IN HOUSTON”) to
3518 Endicott Lane, Pearland, TX 77584

MEMBERSHIP INFORMATION (All items marked with * are mandatory). Children above 26* years of age must be individual members. Please contact the number above for details

Member ID:

Member First Name*:		Member Last Name*:	
Spouse First Name*:		Spouse Last Name*:	
Phone Number*:		Email*:	
Child 1 Name:	Year of Birth:	Child 2 Name:	Year of Birth:
Child 3 Name:	Year of Birth:	Child 4: Name	Year of Birth:

MAILING ADDRESS

Address*:

City*:	State*:	ZIP Code*:
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YEARLY MEMBERSHIP CATEGORY: <input type="checkbox"/> FAMILY: \$40 <input type="checkbox"/> INDIVIDUAL: \$20	\$
DONATION: <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> \$300 <input type="checkbox"/> \$400 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1000 <input type="checkbox"/> \$Other	\$
TOTAL (Membership + Donation):	\$

Maitri In Houston (MIH) is committed to providing a safe and respectable environment for all attendees. By participating in services and events, you acknowledge that you do so at your own risk and agree that MIH is not responsible for any injury, illness, or property damage. You also agree not to hold MIH Board members and any other organizer/volunteer liable for any injury, illness, or dispute related to the services or events

Signature _____ Date _____