Bangladeshi American Social & Cultural Organization, Western New York
(BASCO, WNY Inc)
www.facebook.com/BASCOWNY
e-mail: bascowny@gmail.com
Promoting Bangladeshi Culture & Values

Membership Application

GENERAL DETAILS:

Title_____ (Mr./Mrs./Ms.) ◯ **Male** ◯ **Female** **DOB (mm/dd):_____ Blood Group: _____**

Name: _____, _____,_____
First *Middle* *Last*

Address: _____

City/State/Zip: _____

Phone/Cell: (____) _____ **News Letters:** ◯ **US mail** ◯ **Email**

Email Address: _____

T- Shirt Size: ◯ **Small** ◯ **Large** ◯ **X-Large**

Your Interest or preferred role(s) in the organization (please ✓): Singing/Volunteer Work/Blood Donation/Sports/Women Empowerment/ Youth Development/Bringing New Ideas/Not Certain/Others (please specify):

MEMBERSHIP DETAILS:

ANNUAL MEMBERSHIP DUES (June 1st to May 31st)

_____New Membership _____Renewal Membership _____Gift Membership

◯ **Individual (US$ 10)** ◯ **Family (up to 4 members) (US$ 25)** ◯ **Lifetime (US$ 500)**

Spouse :	**Email(optional):**
Children1:	**Email(optional):**
Children2:	**Email(optional):**

Membership Includes:

- **Newsletters**
- **Meeting Updates**
- **Annual Family Dinner/ BASCO Annual GALA**
- **Upcoming Event Information's**
- **Discounts on BASCO events**
- **More Benefits- TBD**

Membership Amount: $ _____

I'd Like to make an additional gift of: $_____

Total Amount: $_____

EMERGENCY CONTACT:

First Name_____Last NAME_____

Relationship_____Address_____Zip_____

Form No :_____ ***(This section is for Office use only)***

Membership No: _____

Date Paid : _____

Amount : _____

Receipt No : _____

SEAL

Membership# email is sent: Yes/No

_____

BASCO Director Name & Signature

BASCO