

Membership Form
Iranian Cultural Society of NC, Inc
P.O. Box 91206 Raleigh, NC 27675-1206

Please complete this form and return to the above address with your check.
 Make the check payable to ICSNC.

Type of membership: <input type="checkbox"/> Family (\$48.00 per year) <input type="checkbox"/> Single (\$36.00 per year) <input type="checkbox"/> Student (\$26.00 per year)		
Name		
_____	_____	MI
First	Last	
E-mail Address		

Mailing Address		

_____	_____	_____
City	State	Zip
Home Phone: (_____) _____ - _____		
For Family Membership Only		
_____		_____
Spouse First Name		Number of Children
For Student Membership Only		
_____		_____
School you are attending		Graduation date
What is your expectation in joining the ICSNC?		
In which area of the ICSNC would you like to be involved? (this is not a membership requirement, please review the list and select up to 3 committees that might interest you)		
<input type="checkbox"/> Mehregan	<input type="checkbox"/> Sadeh	<input type="checkbox"/> Tirgan
<input type="checkbox"/> Yalda	<input type="checkbox"/> Farsi Classes	<input type="checkbox"/> Poetry Recital, Education
<input type="checkbox"/> Gatherings, Parties	<input type="checkbox"/> Picnics	<input type="checkbox"/> Charshanbeh-Soori
<input type="checkbox"/> Norooz	<input type="checkbox"/> Norooz - Kids	<input type="checkbox"/> Sizdahbedar
<input type="checkbox"/> Newsletter	<input type="checkbox"/> Website	<input type="checkbox"/> Helping Hand
<input type="checkbox"/> International Festival	<input type="checkbox"/> Traditional Music	<input type="checkbox"/> Youth
<input type="checkbox"/> Nominating, Election and Membership		