

# International Digamber Jain Organization

(A Non-Profit / Religious Organization) (tax exemption is being applied.)

3908 Sandalwood Court, Fairfax, VA 22031 (703)426-4004

## Membership / Pledge Donation Form

Name: \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Donation / Membership. \$ / Per Day Amount: \_\_\_\_\_

Method of Payment: Check /Cash /Automatic Debit from Bank please make all checks payable to:IDJO

### This donation is towards the following Membership

Diamond -	Life Time Membership	:	\$100,000 one time or \$50 per day for six year.
Platinum	Life Time Membership	:	\$50,000 one time or \$25 per day for six year.
Gold -	Life Time Membership	:	\$20,000 one time or \$10 per day for six year.
Silver -	Annual Membership	:	\$1 per day or \$360 per year.
Basic -	None Voting	:	Register to get free information and literature.

You need to be 18 year old and a follower of the Digamber Jain Traditions.

### Authorization Agreement For Automatic Debit

I/We authorize IDJO to initiate monthly/quarterly debit entries from my/our (select one) Checking \_\_\_\_\_ or Saving \_\_\_\_\_ account indicated below in the amount of \$\_\_\_\_. The debit will occur around 15<sup>th</sup> of each month. Additional authorization is given to credit or adjust the same stated account, if necessary, for any debit entries made in error.

Account Holder Name: \_\_\_\_\_  
Last First Middle

Bank Name: / Branch Location: \_\_\_\_\_

Account #: \_\_\_\_\_ Routing #: \_\_\_\_\_

This authority is to remain in full force and effect until IDJO has received written notification from me (or either of us) of it's termination in such time and in such manner as to enable IDJO to take action on such termination. Please attach a VOIDED blank Check or Deposit Slip

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Thanks you for your contribution/pledge to IDJO