

## Muslim Council of Peel – Membership Application



### Organization Profile

Legal Name of Organization: \_\_\_\_\_

Incorporation/Charitable Number: \_\_\_\_\_

Office Address: \_\_\_\_\_

Email: \_\_\_\_\_

City: \_\_\_\_\_

Telephone: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Website: \_\_\_\_\_

Please indicate nature of organization:

- Masjid/Islamic Centre
- Musalla
- School
- Social Services Organization
- Other (Please specify): \_\_\_\_\_

### Fees

Please submit membership fee with the signed application. Please make cheque(s) payable to the Muslim Council of Peel. Please note that the annual membership fees are \$5,000 for large Masjids who collect zakat, \$2,500 for mid-size Masjids and Musallas who collect zakat and \$1,000 for small social services organizations who do not facilitate Friday prayers. Fees can be paid in installments.

### Membership Pledge

Member organizations must agree with MCP's vision and mission as well as believe in the Quran as the word of God and the finality of the Prophet Mohammed.

- Yes, we agree with the vision and mission.
- Yes, we believe in the Quran as the word of God and the finality of the Prophet Mohammed.

First and Last Name of Signing Officer 1: \_\_\_\_\_

Signature 1: \_\_\_\_\_

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

First and Last Name of Signing Officer 2: \_\_\_\_\_

Signature 2: \_\_\_\_\_

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

### Representation on Council

Each member organization is entitled to representation by 2 individuals per year. Please provide your representatives' details. Please notify us of any change in representation.

First and Last Name of Designated Representative 1: \_\_\_\_\_

Position: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

First and Last Name of Designated Representative 2: \_\_\_\_\_

Position: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Please mail the signed application with your payment to Muslim Council of Peel 212 - 2120 North Park Drive, Brampton ON L6S 0C9

### MCP Office Use Only

Verification of Status: \_\_\_\_\_

Fees Paid: \_\_\_\_\_

Confirmation of operations in Peel Region: \_\_\_\_\_

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