



Masjid Al-Karam

Al-Karam Foundation مسجد الكرم

1724 Woodlawn Dr. Suit 38 Baltimore, MD 21207

www.masjidalkaram.com

MEMBERSHIP APPLICATION

HEAD OF HOUSE HOLD INFORMATION

First Name:	Middle Name:	Surname:
Date of birth:	SSN:	DL/ID No.
Current address:		
City:	State:	ZIP Code:
Home:	Cell:	Email:
Emergency Contact:		Tel:

SPOUSE INFORMATION

First Name:	Middle Name:	Surname:
Date of birth:	SSN:	DL/ID No.
Current address:		
City:	State:	ZIP Code:
Home:	Cell:	Email:
Emergency Contact:		Tel:

CHILDREN INFORMATION

	NAME	DOB	MARITAL STATUS
1			
2			
3			
4			
5			
6			
7			
8			

DECLARATION

I/We hereby declare that I/we have read and agree to the terms and conditions. We have provided correct information and would join the membership as a Muslim family. We allow the information to be used for administration and the purposes relating to the funeral arrangements. We agree that only the head of household or spouse would be the authorized person to make any decisions. I/We have attached the following fee on the name of Allah for the mutual benefit of Muslim families. I believe all arrangements by the funeral committee are being made for seeking forgiveness from Allah as per commandments of Allah and as per Sunnah of Holy Prophet peace be upon HIM. I shall pay the membership \$100 every six months.

Name:

Signature:

Date:



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REGISTRATION FEE \$100	YES <input type="checkbox"/>	CASH <input type="checkbox"/>
MEMBERSHIP DUES \$100	YES <input type="checkbox"/>	CARD <input type="checkbox"/>
Additional Donation \$	YES <input type="checkbox"/>	CHECK <input type="checkbox"/>

TERMS & CONDITIONS

1. The committee endeavor to manage burial arrangements from hospital to grave or departure of the body to international destination which include coffin, funeral arrangements, purchase of site and transportation of the body.
2. All arrangements are based on coordination and mutual help for seeking pleasure of Allah. In case of depletion of all available funds, members would be required to contribute extra funds if need arises.
3. One family with living in parents would be entitled to avail the services.
4. Membership fee would be due by 10th of January and 10th of July unless agreed by the coordinator.
5. Site of the grave would be determined as per choice of the deceased or authorized person such as spouse or kids.
6. No refund would be issued for the membership fee paid.
7. Overseas burial would be limited to departure of the body.
8. Communication between the members would be through coordinator only
9. A proper receipt would be issued for all contributions. Please keep a copy of check till a valid receipt is issued.

Contacts:

1. M. M. Ahmed Tel: 202-257-9924
2. Khalil Tahir Dad Tel: 410-564-3031
3. Waseem Ashraf Tel: 443-831-2990
4. Masjid Alkaram Tel: 443-985-6382