



Anjuman-e-Saifee, Chicago

A nonprofit Corporation administering & managing the affairs of the Dawoodi Bohra Jamaat of Chicago

WELCOME TO YOUR JAMAAT

Please Print - Complete Both Sides

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Home # _____ Cell # _____ Work # _____

Fax # _____ Email _____

Moving to Chicago from _____

Do you have a Transfer Safaiee Chitti? Yes _____ No _____ : Jamaat _____

Other information or comments _____

Contact info for each committee is available at chicagojamaat.org

Sabeel Per calendar year \$ _____

Qabrastan Plot(s) (\$1,000 per plot) \$ _____

Niyaz Miqaat _____

FMB Thaali Shawal - Sherullah \$ _____

Mufaddal Qardan Hasana Hussain Scheme \$ _____ ACH Form

I/We am/are interested in serving the jamaat by participating in these committees:

- | | | |
|--|---|---|
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Niyaz |
| <input type="checkbox"/> Burhani Women's Assn. | <input type="checkbox"/> Mufaddal Qardan Hasana | <input type="checkbox"/> Shabab ul Eidiz Zahabi |
| <input type="checkbox"/> Faiz ul Mawaid Burhaniyah | <input type="checkbox"/> Nazafaat (Cleanliness) | <input type="checkbox"/> Tayzeen (Decorations) |
| <input type="checkbox"/> Madrasa | <input type="checkbox"/> _____ | |

Please indicate if you have served previously in any of these capacities. _____

Signature of:
Head of Household _____ Date _____

Amil Saheb Raza _____ Date _____

Names of Family Members	Information				
	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell
	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell
	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell
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	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell
	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell
	Ejmaat ID	Relationship	DOB	Watan (hometown)	Occupation
	Email			Sabak(s) Read	Cell

We want to make you and your family feel welcomed and attend to all of your needs. Please indicate if anyone in your family requires Special Assistance:
