



THE HINDU COUNCIL OF TANZANIA

P O Box 581, Dar Es Salaam, Tanzania

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MEMBERSHIP FORM

Name:
Date/Year of Establishment
Contact / email / Website:
Physical Address (if available)
Name and Contact of Trustees
Name and Contact of Management Committee
Name and Contact of sub-committee [Youth / Laides Group]
AGM and Election Modalities [Yearly, general dates or time frame]
Approx Numbers of Members:

Activities:

Comments (if any):

Use additional stationery where necessary

We the undersigned agree and accept the Constitution of The Hindu Council of Tanzania.

We request for membership.

Signature
Chairman
Name
Date

Signature
Secretary
Name
Date

Please Attach: [1] Copy of current Constitution [2] Copy of Registration Certificate [3] List of Management Committee & Contacts [4] List of Trustees & Contacts

Fees Structure:
1-100 Members Tshs 50,000
101-200 Members Tshs 100,000
201 plus Tshs 200,000