

EARLY REGISTRATION DEADLINE – SEPTEMBER 7, 2014



Houston Durga Bari Society

13944 Schiller Road, Houston, TX 77082, USA
 A non-profit 501(c) Tax Exempt Organization – EIN # 76-0508370
 Phone: 281-531-5346 & 281-531-5742



Email: registration@durgabari.us **Online Registration:** <https://www.durgabari.us/registration>

Please mail this registration w/ check made payable to **"HDBS PUJA COMMITTEE"** to
HDBS Puja Committee, PO Box #820307, Houston, TX 77282

REGISTRANT INFORMATION (All items marked with * are mandatory)

TYPE <input type="checkbox"/> ACTIVE MEMBER <input type="checkbox"/> NEW/RENEWING MEMBER (Fill Membership form) <input type="checkbox"/> OUT-OF-TOWNER (Member rate)				
First Name*:		Last Name*:		
Spouse's Name*:		Last Name*:		
Child 1:	Age: (< 22 YRS)	Child 2:	Age: (< 22 YRS)	
Parent 1:		Parent 2:		
MAILING ADDRESS (<input type="checkbox"/> Please check here in case of change in address)				
Address*:				
City*:		State*:	ZIP Code*:	
Phone (H)*:		Phone (M):	Phone (W):	
Email 1*:		Email 2:		

2014 PUJA SUBSCRIPTION PACKAGES (Inclusive of Lunch and Dinner)

CATEGORY	FAMILY (SENIOR)	INDIVIDUAL (SENIOR)	STUDENT (W / ID)	PAID
MEMBERS AND OUT-OF-TOWNERS:				
All 3 PUJAS (After September 7 th , Families pay \$50, Individuals pay \$25 more)	<input type="checkbox"/> \$250 (\$225)	<input type="checkbox"/> \$150 (\$135)	<input type="checkbox"/> \$75	\$
DURGA PUJA (After September 7 th , Families pay \$50, Individuals pay \$25 more)	<input type="checkbox"/> \$200 (\$175)	<input type="checkbox"/> \$125 (\$110)	<input type="checkbox"/> \$50	\$
KALI PUJA	<input type="checkbox"/> \$125 (\$100)	<input type="checkbox"/> \$80 (\$65)	<input type="checkbox"/> \$25	\$
SARASWATI PUJA	<input type="checkbox"/> \$80 (\$55)	<input type="checkbox"/> \$50 (\$35)	<input type="checkbox"/> \$20	\$
NON-MEMBERS:				
All 3 PUJAS (After September 7 th , Families pay \$50, Individuals pay \$25 more)	<input type="checkbox"/> \$400 (\$375)	<input type="checkbox"/> \$240 (\$225)	<input type="checkbox"/> \$75	\$
DURGA PUJA (After September 7 th , Families pay \$50, Individuals pay \$25 more)	<input type="checkbox"/> \$320 (\$295)	<input type="checkbox"/> \$180 (\$165)	<input type="checkbox"/> \$50	\$
KALI PUJA	<input type="checkbox"/> \$200 (\$175)	<input type="checkbox"/> \$120 (\$105)	<input type="checkbox"/> \$25	\$
SARASWATI PUJA	<input type="checkbox"/> \$120 (\$95)	<input type="checkbox"/> \$75 (\$60)	<input type="checkbox"/> \$20	\$
PUJA DONATION	FLOWERS <input type="checkbox"/>	BHOG <input type="checkbox"/>	WATER <input type="checkbox"/>	MISHTI <input type="checkbox"/>
	LUNCH <input type="checkbox"/>	OTHER <input type="checkbox"/>	\$	

TOTAL \$

SPONSORSHIP LEVELS (DONATION)	EXPRESS LANE	FRONT ROW SEATING	RESERVED PARKING
<input type="checkbox"/> PLATINUM (\$1200 +)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> GOLD (\$800 – 1199)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	None
<input type="checkbox"/> SILVER (\$400 – 799)	<input checked="" type="checkbox"/>	None	None

PAYMENT METHOD

CHECK	No.:	DATE:	BANK:	AMOUNT: \$	CASH
CREDIT CARD	VISA <input type="checkbox"/>	MASTER CARD <input type="checkbox"/>	AMERICAN EXPRESS <input type="checkbox"/>	Expiry (MM/YY)	Card No. :

Billing Address:
 (Not Required if same as Mailing Address)

City:	State:	ZIP Code:
Signature of Cardholder:		Date: