



Jazak'Allahu khayran for your organization's interest in becoming a member of the Shura Council.

Along with the completed application, we require the following:

- A Copy of the letter from the IRS stating that your organization is a registered 501C3.
- A Copy of your organization's bylaws
- A check for annual membership dues

Please feel free to contact our office if you have any questions.



## **SHURA COUNCIL MEMBERSHIP BENEFITS**

By the grace of Allah, the Islamic Shura Council has been serving the community for more than two decades and has grown from less than 10 members to now more than 70 members, alhamdulillah.

We hope the following membership benefits will encourage you to become a member if your Masjid or organization is not yet a member of the Shura Council.

- 1) Fulfill Allah's commands to "be united," to "work together" and to "conduct affairs through mutual consultation." (Holy Quran - 3:103; 5:2; 42:38)
- 2) Build new relationships or strengthen existing relationships by leveraging the SoCal Muslim leadership network that Shura Council brings together on a regular basis.
- 3) Ability to share your 'interests and needs" with the larger leadership while making yourselves aware of others.
- 4) Promote your community events/activities/programs to all of Southern California and beyond through the Shura Council's community calendar and weekly e-newsletter.
- 5) Benefit from the Islamic Leadership Training Program and online resources which is an ideal resource for Imams and Masjid boards.
- 6) Benefit from the Masjid Operations Manual (M.O.M), a first-of-it's-kind resource for Masjid leadership, staff and volunteers.
- 7) Benefit from the Masjid Group Insurance Program, exclusively available to member Masjid and Muslim Organizations.
- 8) Benefit from Shura Council commissioned surveys and analysis for future planning.
- 9) Benefit from the Shura Council mediation/arbitration services.
- 10) Benefit from having your voice/perspective heard in other regional Shura Councils, such as in Bakersfield, Northern California, Chicago, Michigan and others.
- 11) Benefit from having your voice/perspective heard as well in national forums, such as, ICNA, ISNA, MAS, MANA, USCMO and others.
- 12) Benefit from the Shura Council's established network of service providers in various areas from hotels to A/V providers, printers to trainers, among others.
- 13) Benefit from the Shura Council's established network of speakers/scholars for member events.

- 14) Benefit from the Shura Council's publications for outreach purposes and for new Muslims, such as, English translation of Quran, Welcome to Islam and How to Pray in English and Spanish language.
- 15) Support services for complex religious matters.
- 16) Support for capital and/or temporary funding needs.
- 17) Support with legal services through justice partners.
- 18) Support from leading interfaith leaders and groups.
- 19) Support to the incarcerated from member community.
- 20) Listing in the Community Resource Directory.



## Membership Application Form

**New**       **Renewal**

<b>ORGANIZATION NAME</b>					
Street Address					
City:		State		Zip code	
Telephone		Fax No.			
Email		Web Address			
Organization Status: Non Profit: (circle one) Yes No If yes, registered as: (circle one) Religious   Educational   Charitable   Other _____		Tax Exempt: (circle one) Yes No Tax ID# _____			
<b>Profile of the Organization</b>					
Year Established		Area Organization Occupies, Sq.Ft.			
Estimated Number of attendees during Friday Prayers:		School (circle one) Yes No If yes, type of school (circle one) Daily (M-F)   Saturday   Sunday   Other _____			
Executive's Information:	Term Exp.	Name	Tel	Email	
President/Chair					
Secretary					
Treasurer					
Publications (circle all applicable) Newsletter   Magazine   Other _____ and Name:					
Please list any other activities with name and contact info of person in charge:					
Youth Group:					
Women's Group:					
Other Group(s) (please specify):					
<b>Shura Representative Name:</b>					
Organizational Title:			If holding an office, term expiration date:		
Home Address:					
City:			State:	Zip Code:	
Cell Phone:		Alt. Phone:		Email:	
<b>Alternate Representative Name:</b>					
Organizational Title:			If holding an office, term expiration date:		
Home Address:					
City:			State:	Zip Code:	
Cell Phone:		Alt. Phone:		Email:	

List the Two Active Member Organizations of the Islamic Shura Council of Southern California (ISCSC) Who Recommend your Organization (Required)		
Name	Organization	Signature of Shura Representative
<b>Certification</b>		
<p>On the behalf of _____ (name of organization), I hereby apply to become an active member of the Islamic Shura Council of Southern California an pledge to support its programs and services and abide by its bylaws and policies. I certify under penalty of perjury, under the laws of the State of California and the laws of the United States of America that the contents of this application, with all its supporting attachments is true and correct.</p> <p>Name: _____ Signature: _____ Date: _____</p> <p>Please attach the following to the completed application:</p> <p><input type="checkbox"/> Organization Bylaws (Required)</p> <p><input type="checkbox"/> Copy of IRS letter stating nonprofit status (Required)</p> <p><input type="checkbox"/> Annual Membership Dues (Required) Ck# _____ Amt. _____</p>		

Office Use Only		
<input type="checkbox"/> Full Member <input type="checkbox"/> Associate Member <input type="checkbox"/> Honorary Member		
Date of Application Approval: _____		
Reason for Pending: _____		
Application Denied Reason: _____ _____		
Membership Terminated Effective Date _____		
Reason _____ _____		
Membership Comm. Chair	Name	Signature
ISCSC Majlis Chair	Name	Signature
Administrative Officer	Name	Signature

Written Resolution from Board of Directors or Equivalent Body

Organization Name: \_\_\_\_\_

1. Current President/Chairperson Name: \_\_\_\_\_ Term Expires: \_\_\_\_\_

2. Current Vice President/Chairperson: \_\_\_\_\_ Term Expires: \_\_\_\_\_

3. Current Secretary Name: \_\_\_\_\_ Term Expires: \_\_\_\_\_

4. Treasurer Name: \_\_\_\_\_ Term Expires: \_\_\_\_\_

Name of other Board of Directors:

5. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

6. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

7. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

8. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

9. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

10. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

11. \_\_\_\_\_  
*Name* *Committee in Charge of* *Term Expires*

The Board of Directors or \_\_\_\_\_ of aforementioned organization have discussed the Motion of joining the Islamic Shura Council of Southern California on their regular/special meeting on

\_\_\_\_\_ At \_\_\_\_\_  
*Date* *Location of Meeting*

**The Motion was approved unanimously.**

Signature of Authorized Person: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Signatory above: \_\_\_\_\_ Title: \_\_\_\_\_