



North America Shirdi Sai Temple of Atlanta, Inc
700 James Burgess Road, Suwanee, GA 30024
Phone: 678-455-7200
(A Non-Profit Organization - Est. 2000
Tax ID # EIN-58-2615661)

Trustee Pledge Form

Name: _____ Spouse: _____

Address: _____

City, State, _____ State: _____ Zip _____

Telephone: Home: _____ Cell: _____

Email: _____

"I _____, (or)

We, _____ and _____ hereby
apply to become a trustee/trustees of the North America Shirdi Sai Temple and pledge to fulfill
the requirements as set forth by the Board of Trustees of the Temple and abide by its by laws and
policies. I/We will commit my/our time and energy to uphold and support the Shirdi Sai ideals
that the temple represents.

Further, I/We commit to donate \$10,001 towards the fulfillment of the pledge, in the following
manner: Enclosed is \$ _____ (first payment minimum of \$2116) and the balance is
payable over a two year period. (Monthly / Quarterly/ Semi-Annual/ Annual payments)

If for any reason I/We fail to fulfill the pledge in the prescribed time, I/We acknowledge that the
funds already donated to the temple will not be refunded and I/We consent to this provision.

When I/We fulfill my/our pledge and become trustee/trustees of the temple, I/We consider this a
sacred responsibility and agree to attend the meetings of the trustees to the best of my/our ability
and also volunteer to help in the day to day functioning of the temple."

Signed: _____ Date: _____

Signed: _____ Date: _____