



MATIYA WORLD MEMBERSHIP APPLICATION FORM

3160 E. La Palma Ave, Suite E., Anaheim, CA 9280
 Phone: 714 510 8200 | Fax: 714 632 3582
 E-Mail: info@matiyaworld.com
 Tax ID 20-4079025

Change of Address: Yes___ No___ New Member:_____ Life Member:_____ Renewal:_____

Please Print Clearly In CAPITAL LETTERS
APPLICANT INFORMATION: Head of House Hold

| | | | | |
|--|--------------|------------|---------------|----------|
| First | Last | Middle | Gender | |
| Father's & Grandfather's Full Name | | Birth Date | Village | |
| Street Address | | City | State | Zip Code |
| Home Phone | Mobile Phone | | Email Address | |
| PROFESSIONAL INFORMATION (information not printed in directory) | | | | |
| Company | Industry | | Title | |
| Degree (in progress) | | Location | | |
| Other Skills/Hobbies | | | | |

OTHER FAMILY MEMBERS: SPOUSE:_____ CHILD:_____ SENIOR:_____

| | | | | |
|--|--------------|------------|---------------|--------------|
| First | Last | Middle | Gender | Relationship |
| Father's & Grandfather's Full Name | | Birth Date | Village | |
| Street Address | | City | State | Zip Code |
| Home Phone | Mobile Phone | | Email Address | |
| PROFESSIONAL INFORMATION (information not printed in directory) | | | | |
| Company | Industry | | Title | |
| Degree (in progress) | | Location | | |

OTHER FAMILY MEMBERS: SPOUSE: _____ CHILD: _____ SENIOR: _____

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Membership Fee Options

One Year: per Adult \$25 | per Youth (18 and under) \$10 | per Senior (60+) FREE

| | |
|------------------|---|
| Bronze Member: | \$1,000/Family Includes entire family membership for 10 years.* |
| Silver Member: | \$5,000/Family Includes entire family membership for a life time.* |
| Gold Member: | \$10,000/Family Includes entire family membership for a life time.* |
| Platinum Member: | \$25,000/Family Includes entire family membership for a life time.* |

**Additional details enclosed or also can be found at www.matiyaworld.com*

Payment Detail

| Name | Amount | Credit Card Information |
|-------|--------|------------------------------------|
| 1 | | Total Amount Enclosed: |
| 2 | | Type of Credit Card |
| 3 | | M/C: _____ VISA: _____ AMEX: _____ |
| 4 | | CC Number: |
| 5 | | Exp. Date: _____ CVC #: _____ |
| 6 | | Name of Card Holder: |
| 7 | | Zip Code: |
| 8 | | Signature: |
| Total | | |

Make checks or bank draft payable to:

MATIYA WORLD, INC.

Mail registration & check to:

Matiya World, Inc.

3160 E. La Palma Ave., Ste E. Anaheim, CA 92806

| | |
|---------------------------------------|-------------|
| | |
| Signature (Head of House Hold) | Date |

By signing this form I understand that this membership application will be reviewed by Matiya World. I also understand that the membership fees are non-refundable. The above information is true and correct to the best of my knowledge. I understand that any misrepresentations or falsification will result in the cancellation of my membership. By providing the contact information, I understand that Matiya World may communicate with me via phone, e-mail, or USPS. Matiya World will maintain address and e-mail information with strict confidence and will not be used or given to others for solicitation.

Other Notes/Suggestions: