

# Islamic Center of Nashville

## ICN



### Direct Deposit Form

I, \_\_\_\_\_, authorize the Islamic Center of Nashville to withdraw other \$\_\_\_\_\_ per month from my bank account. I understand I may change or end this agreement anytime with a written notice to ICN.

Bank Name: \_\_\_\_\_

Account number: \_\_\_\_\_

Bank Routing number (printed on your check): \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. \_\_\_\_\_

X \_\_\_\_\_

**Signature**

**Date**

Donations will go towards the Masjid Operations.

Please attach a voided check.

Please mail to :

Islamic Center of Nashville

Attn: Br. Sajid Usmani

P.O. Box 120953

Nashville, TN 37212

For any questions please contact:

Br. Sajid Usmani (400-4956) or Sr. Tanuja Chowdhury (861-0773)