



॥ श्री गणेश ॥

SAI DATTA MANDIR INC.,  
[A501(C)(3) Non-Profit Organization, Fed ID#46-0599196]

॥ सच्चिदानंद ॥



# SAI DATTA PEETHAM & CULTURAL CENTER SRI SHIVA VISHNU TEMPLE NJ

1665-370 Oaktree Rd, Edison, NJ 08820

Email : [info@saidattanj.org](mailto:info@saidattanj.org), Phone : 732-662-3250, 51, 52 Fax : 732-662-3253, 516-359-8178(M)

<https://www.saidattanj.org>

## MONTHLY SUPPORTERS

Sai Datta Peetham, Shri Siva Vishnu NJ is inviting devotees to avail a unique opportunity by signing up as monthly patrons.

Devotees can sponsor any amount for \*daily Archana and Abhishekam on their name including family members.

See below table for details. Please contact temple front desk or call the numbers on flyer for more details, questions.

**\$201**

**In a Month  
Daily Archana & 6 Abhishekams**

ఒకే నెలలో

రోజువారి అర్చన & 6 అభిషేకాలు

**\$151**

**In a Month  
Daily Archana & 4 Abhishekams**

ఒకే నెలలో

రోజువారి అర్చన & 4 అభిషేకాలు

**\$101**

**In a Month  
Daily Archana & 2 Abhishekams**

ఒకే నెలలో

రోజువారి అర్చన & 2 అభిషేకాలు

**\$51**

**In a Month Daily Archana**

ఒకే నెలలో రోజువారి అర్చన



**SDP SSVT NJ MONTHLY SUPPORTERS  
APPLICATION FORM**

<https://www.saidattanj.org/ssvtform.aspx>

**For more details please contact**

Raghusarma Sankaramanchi 516-359-8178

**Temple Front Desk at 732-809-1200, 732-662-3250, 3251, 3252**

**For LIVE Programs**

<https://facebook.com/saidattanj>



<https://youtube.com/user/saidattapeetham>





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## Application Form

Gotram: .....  
First& Last Name: ..... Nakshatram:.....  
Spouse Name: ..... Nakshatram:.....  
Children 1: .....Nakshatram:.....  
Children 2: .....Nakshatram:.....  
Children 3: .....Nakshatram:.....  
Mailing address: .....  
Mobile Number: ..... Home Number:.....  
Email id: .....

Join the SDP SSVT Monthly Supporters – Life Membership

I would like to become a Life Member of the SDP SSVT Monthly Supporters and be part of the SDP SSVT Family. I have completed this form and I'm submitting a contribution of \$51 / \$101 / \$151 / \$201. I agree that my information will be kept on record as long as I remain a member.

### In Addition to the above.....

"SDP SSVT Monthly Supporters contributing \$51/\$101/\$151/\$201 per month are entitled to a daily Archana offered to a deity of their choice, along with Monthly participation in 2/4/6 Abhishekam's whenever they are performed."

DEITY for Archana: \_\_\_\_\_

Abhishekam1: \_\_\_\_\_ Abhishekam2: \_\_\_\_\_

Abhishekam3: \_\_\_\_\_ Abhishekam4: \_\_\_\_\_

Abhishekam5: \_\_\_\_\_ Abhishekam6: \_\_\_\_\_

"SDP SSVT Monthly Supporters are also entitled to request an special Archana to any deity on their special occasions, such as *Birthdays, Wedding Anniversaries, or other personal milestones.*"

"We warmly invite all community members to join the divine SDP SSVT Monthly Supporters Family and help make our temple a truly unique and cherished icon in the community."

This Membership Proceeds will be used towards SDP SSVT Expansion and other daily rituals & Annaprasada Seva.

**To become a Monthly Supporter, please: Fill out the Credit Card Authorization Form below**

### SELECT MODE OF PAYMENT:

☐ Credit Card ☐ Cash ☐ Cheque ☐ Online (Zelle) to : [saikoti@saidattanj.org](mailto:saikoti@saidattanj.org)

Bank Details to make payment: **Routing number: - 031201360**

**Account Number: - 4336129279**

Select Contribution Amount: ☐ \$51 ☐ \$101 ☐ \$151 ☐ \$201 ☐ Other: \$ \_\_\_\_\_

Credit Card Authorization Form (Please complete all fields. You may cancel anytime.)

Card Type: ☐ MasterCard ☐ Visa ☐ Discover ☐ Amex ☐ Other

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

CVV: \_\_\_\_\_ Expiry (MM/YY): \_\_\_\_\_

Billing ZIP Code: \_\_\_\_\_

### Authorization

I, \_\_\_\_\_ authorize SDP SSVT to charge the selected amount and payment period to my card. I understand my details will be stored securely and this authorization will remain active until I choose to cancel.

Devotee Signature:

Date:

“Sai Natha Sri Matha Anugraha Prapthirasthu”

-----Thank You for Your Support-----

**For more details please contact**

Raghusarma Sankaramanchi 516-359-8178

**Temple Front Desk at 732-809-1200, 732-662-3250, 3251, 3252**