

2009-2010 AAF-FS MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:		
Date:		
Current address:		
City:	State:	ZIP Code:
Home Phone:	Cell Phone:	Date of birth (Month/Date):

EMPLOYMENT INFORMATION

Current employer:		
Employer address:		How long?
City:	State:	ZIP Code:
Phone:	E-mail:	Fax:
Position:		

COMMITTEES OF INTEREST (CHECK ALL THAT APPLY)

(This is not a commitment. It is just an indicator of the committees you might like to participate on.)

ADDY Awards	<input type="checkbox"/>
Awards-Club Achievement	<input type="checkbox"/>
Education	<input type="checkbox"/>
Finance	<input type="checkbox"/>
Fundraising	<input type="checkbox"/>
Legislative	<input type="checkbox"/>
Membership	<input type="checkbox"/>
Programs	<input type="checkbox"/>
PR/Newsletter	<input type="checkbox"/>
Public Service	<input type="checkbox"/>

DUES

Select Membership Level. You will be invoiced for your dues.

Individual \$150 Annually	<input type="checkbox"/>	
Student \$60 Annually	<input type="checkbox"/>	
Non-Profit \$75 Annually	<input type="checkbox"/>	
Corporate "A" \$450 (3-25 Employees)	<input type="checkbox"/>	
Corporate "B" \$550 (25+ Employees)	<input type="checkbox"/>	
Contact:	Position:	Phone:
Address:	State/Zip:	Email:

