



ASIAN INDIAN ALLIANCE OF OHIO

Year of
Membership
2018

APPLICATION FOR MEMBERSHIP

Name: _____

Spouse Name: _____
(for AIA Events)

Mailing Address: _____

County: _____

City: _____ State: _____

Zip: _____

Home: () _____ Work: () _____

Mobile: () _____

Primary Email: _____

Alternate Email: _____

Profession/Company: _____

Title: _____

Community Investment/Services: Indian: _____
US: _____

Party Affiliation (check one): Democrat Republican Independent

Previous AIA Involvement/Committees: _____

Political Activities /Fund Raising: _____

Please check the city closest to your home address. This will be your REGION.

<input type="checkbox"/>	Akron-Canton	<input type="checkbox"/>	Cleveland	<input type="checkbox"/>	Dayton	<input type="checkbox"/>	Toledo
<input type="checkbox"/>	Cincinnati	<input type="checkbox"/>	Columbus	<input type="checkbox"/>	Mid-Ohio	<input type="checkbox"/>	Youngstown-Warren
<input type="checkbox"/>	Check if you don't want your information, except Name, on the AIA Website						

Checks should be made payable to: **Asian Indian Alliance**
Mail to: **P.O. Box 20691, Columbus, Ohio 43220**

Commitment (Corporate Checks acceptable): TOTAL.....\$400.00
• Application Fee.....\$ 50.00
• Annual Dues.....\$350.00

- All AIA membership applicants will sign a document stating that he/she has read the by-laws and agree to abide by them.
- All AIA membership applicants agree to support the goals of AIA.
- If dues are not paid by March 1st, the member will forfeit his/her membership and must reapply and be approved by the Executive Committee. There will be a reinstatement fee of \$50.00.
- New applicant's one-time application fee of \$50.00 will be refunded if application is denied.
- Applicant becomes a member 30 days after approval and upon receipt of yearly dues.
- Members are responsible for signing the attendance sheet at meetings.

APPLICANT Signature _____ Date _____

Application for AIA Membership is recommended by: (MUST BE COMPLETED BY APPLICANT)

Member Name: _____ Member Signature: _____ Date: _____

(Name & Signature of AIA Member in Good Standing)

For AIA Office Use:

Approved by AIA executive Committee on _____
(Date)

Application approved: _____
(President's Signature) (Date)