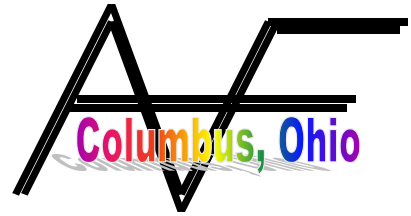


Asians & Friends - Columbus

Application for Membership / Renewals



Name _____
 Last First Middle Given Name (if any)

Partner's Name _____
 (For Joint Application) Last First Middle Given Name (if any)

Address _____

City _____ **State** _____ **Zip** _____ **Country** _____

Phone # (Home): _____ **(Work):** _____ **(Cell Phone):** _____

E-mail # 1: _____ **Date of Birth** _____ / _____ / _____
 Month Day Year

E-mail # 2: _____ **Date of Birth** _____ / _____ / _____
 Month Day Year

Place of Birth _____ **Nationality** _____

Current Occupation _____ **Employer / College** _____

Hobbies / Interests _____

Please indicate any volunteer work or talent you could kindly provide to benefit Asians & Friends (A&F)... This is how I/we can add value to the organization:

- Provide Meeting/Gathering Location
- Provide Transportation (Carpool)
- Provide Ideas & Suggestions
- Help Planning AFCMH Events
- HELP ~ AFCMH Newsletters
- Cooking
- Provide Accommodation for out-of-town visitors. How many? _____
- Fund Raising

Other (Please Specify) _____

Which of the following do you permit **AFCMH** to publish in the Membership Directory or other brochure or publication? All information will be kept confidential unless indicated as follows:

- Name
- Address
- Home Phone #
- Cell Phone #
- E-mail Address
- Photographs

How do you prefer to be contacted of A&F activities? E-mail Mail Phone Other _____

Non-refundable Membership Fees:

- Student (full-time) - \$15 / year**
- Single Rate - \$20 / year**
- Couple Rate - \$30 / year**

For more information ~ Please visit our web site at www.afcmh.com or e-mail info@afcmh.com

Asians & Friends Columbus (AFCMH) does not discriminate based on race, age, sex, color, religion, national origin, disability or sexual orientation. Please accept my/our application for membership(s) to AFCMH. I/we fully understand that any violation of the AFCMH policies and/or by-laws may result in the termination of my/our membership. I/we further understand that the relationship between the organization and the members is at will and can be terminated by either party at any time.

1st Member's Signature _____ **Date** _____ / _____ / _____

2nd Member's Signature _____ **Date** _____ / _____ / _____