

Asaba Association, Inc.
 c/o President, 11202 Riverview Road, Fort Washington, MD 20744
 www.asaba.org

MEMBERSHIP FORM

All prospective members of Asaba Association are required to complete this registration

SECTION 1: MEMBER CONTACT INFORMATION

TITLE	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other, specify:		
FULL NAME			
ADDRESS 1		MAIN TELEPHONE	
ADDRESS 2		WORK TELEPHONE (if different)	
ADDRESS 3		HOME TELEPHONE	
TOWN/CITY		MOBILE PHONE	
POST CODE		PRIMARY EMAIL	
COUNTRY		SECONDARY EMAIL	

SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	REGISTRATION	MEMBERSHIP DUES	TOTAL
STANDARD	Individual / Couple	US\$25 / US\$35	US\$ ____	
HONORARY	Individual / Couple	US\$25 / US\$35	N/A	

SECTION 3: MEMBER INFORMATION

GENDER: MALE <input type="checkbox"/> FEMALE: <input type="checkbox"/>	MONTH/DAY OF BIRTH:
OCCUPATION :	INDUSTRY:
REFERRED BY:	

Declaration: I agree to abide by the rules and regulations of Asaba Association as set out in its Constitution and/or Bylaws.

SIGNED (or write name here)	DATE _____
---------------------------------------	-------------------

The information provided above will also be used to keep you informed about Asaba Association events in future.

FOR Asaba Association USE ONLY:

Date Received		Chk /PO rec'd		Payment confirmed		Receipt issued		Membership Start Date	
---------------	--	---------------	--	-------------------	--	----------------	--	-----------------------	--

Association Approval By President	DATE
SIGNED (President):	

BENEFITS

Making a Difference / Asaba Association provides the avenue whereby group efforts enhance individual skills and experiences in bringing about change in the lives of the underserved members of society.

Networking and Friendship / Members are able to forge long-lasting relationships and network with one-another. The life-long bonds formed have greatly contributed to the growth and success of the organization.

Life Insurance / Asaba Association members may be eligible to purchase life insurance policy (with a designated family member as a beneficiary) on a purely voluntary, non-mandatory, basis, at low group rates. The life insurance policy requires no medical tests. The association will not pay, support, or contribute towards the life insurance premiums.