

India Association of Memphis, Inc.

PO Box 382893, Germantown, TN 38183-2893

http://www.iamemphis.org

Membership Application Form



I, _____ and my spouse, _____
(LAST NAME) (FIRST NAME) (LAST NAME) (FIRST NAME)

Wish to become member/s of India Association of Memphis, Inc., as noted below.

Membership Type:

Annual - Family () Individual () Int'l Student Individual () for the year _____

Life - Family () Individual () Starting in the year _____

Membership Fees:

Membership Type	Family	Individual	Int'l Student Individual	Friends of IAM
Annual Membership	\$20.00	\$15.00	\$5.00	\$100.00
LIFE Membership	\$200.00	\$150.00	N/A	N/A

Amount Enclosed \$ _____ Payment by: Check _____ Cash

This membership application is: New Renewal

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Name of Children: _____

I, _____ authorize IAM to publish the information checked below in their "Directory".

___ My name & full address, ___ Spouse & children names, ___ Telephone No., ___ e-mail, as provided above.

I agree to abide by the applicable IAM By-Laws.

Applicant's Signature _____

Date: _____

I would you like to volunteer at IAM functions I would like to receive newsletter via e-mail

IAM representatives can contact me via email

Please mail the completed form with a check payable to India Association of Memphis to the address above.

To be filled by IAM:

Date Received: _____ by: _____

Date Logged: _____ by: _____

Membership shall be subject to the approval by the IAM board. Family membership is required for dependents to have membership privileges at IAM events including participation in events.