

MEMBERSHIP BENEFITS

- Working with other 4A members in strengthening the cultural bonds within and outside the Asian American and Pacific Islander communities, Enhancing our vision in the American Dream.
- Receiving vital information pertaining to your needs and interest, 4A newsletter periodically, as well as other mailings and invitations,
- Participate and attend various social and cultural events, also an opportunity to fellowship with members and understand and appreciate other cultures.
- Joining hands and minds in unifying all Asian Americans and Pacific Islanders to form a broader organizational base with in the 4A.
- Being part of a forum that addresses concerns or conditions regarding family, education, immigration, employment, health, social needs, your rights, and much more.
- Knowing that you are making a different in your community, locally or world wide using the Arizona Asian American Association as your platform. Reaching out to all regardless of race, religion, income, gender or political affiliation.
- You have friends and an organization who understand you and available to support and assist you with any situation you may encounter.



AAAA membership is open to any person regardless of race, religion, gender, nationality or country of origin

Come join us

Arizona
Asian American Association



Bringing cultures together

PO Box 64864
Phoenix, AZ 85082-4864
Web: www.aaaa-az.org

New Members: Thao Tran
Email: thao1688az@gmail.com
Secretary: Yayu Khoe
Email: mailto:yayurealtor@gmail.com

Join us on Face Book



ARIZONA ASIAN AMERICAN ASSOCIATION

Membership Application Form

Annual membership dues are \$30 for regular member, \$40 for a family and \$15.00 for student member. Business Membership for \$150.00 "Friends of AAAA".

Please send completed form with check payable to:

Arizona Asian American Association
PO Box 64864 Phoenix, AZ 85082-4864
Attn.: Membership Committee

Membership Year: _____ Date: _____

Last Name: _____ Middle Name: _____

First Name: _____ Ethnic Origin: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: (Home) _____ (Work) _____

Website: _____ (e-Mail) _____

Employer Name: _____ Occupation: _____

Hobbies/Interest: _____

Please check:

Available for consulting? _____ (Yes) _____ (No)

Willing to serve on board? _____ (Yes) _____ (No)

Willing to serve on committee? _____ (Yes) _____ (No). *If yes, please circle:*

Membership Database; Bylaws Review; Social; Grant Application;
Newsletter Publishing; Affirmative Action; Festival; Children/ Family;
Community Outreach; School Outreach; Fundraising; Convention/ Banquet.

Your additional tax-deductible donation (\$ _____) for: *circle one*

General Fund School Outreach Scholarship Festival

Type of activities you would like AAAA to sponsor:

(For official use)

Received by: _____ Date: _____

Amount Paid: _____ Check #: _____ Member ID: _____

Membership effective from: _____ to _____