

American Indian Community House-Application for Voting Membership

Become a Voting Member of the American Indian Community House



Voting Membership is based on several possible criteria and is approved by the Board of Directors. Voting Members are welcome to participate in the many programs and activities of AICH and entitled to vote for and serve on the Board of Directors.

PERSONAL INFORMATION

Name: _____ Date of Birth: _____
(must be 18 years or over)

Address: _____ APT/FLOOR: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____ EMAIL: _____

Telephone: _____
(Day) (Night) (Occupation)

TRIBAL/NATION INFORMATION

Tribal/Nation Affiliation _____ Degree _____

Tribal Council's Address _____
(WHETHER ENROLLED OR NOT – IF KNOWN)

Mother's Name & Tribal Affiliation _____

Tribal Council's Address (If applicable and if known) _____

Father's Name & Tribal Affiliation _____

Tribal Council's Address (If applicable and if known) _____

Signature _____ Print Name _____

Please tell us about yourself, i.e. special skills and talents you might be willing to share with us as a volunteer or for payment, and information about you or your family, that will help us get to know you if we don't already [use additional sheets if necessary]:

Please submit at least one or more of the six criteria listed below along with this application to: **the Executive Director**. If none of these items are available, you may wish to submit an application for *Associate Membership*. Family members are encouraged to join AICH and must apply on separate forms. Youth under 18 may apply at any age and if approved, Voting Membership cards will be issued upon their 18th birthday. Also, enclose a \$10.00 check or money order payable to AICH for the annual processing fee. Thank you.

CRITERIA FOR VOTING MEMBERSHIP

1. Your Roll or Band Number, or
2. Parent's Roll or Band Number, or
3. Notarized letter from a Federally or State recognized Indian Nation/Tribe stating heritage, or
4. Birth Certificate indicating Indian Heritage, or
5. College/School transcript with Indian documentation, or
6. Letter from Village official

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Mail/Fax to: American Indian Community House
11 Broadway, 2nd Floor, New York, NY 10004
Fax: 212-598-4909

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AICH Use Only

Applicant: _____

Applying for (Check one):

Voting: _____

Associate: _____

Affiliate: _____

Submitted to the Board (Date): _____

Board Approval: 1. _____

2. _____

3. _____

Placed on Mailing List: _____ Entered on Rolodex: _____

Letter/Card Mailed: _____

To

Date

Change(s) Of Address:

Other notes:

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