



KOREAN AMERICAN COALITION
ATLANTA CHAPTER

2010 Membership Form

Name: _____

Address: _____

Phone: _____

Email Address: _____

Occupation: _____

Type of Membership (please check):

____ Student (\$20) ____ New ____ Renewal
(Full-time undergraduate, graduate, or Ph.D.)
____ Professional (\$30) ____ New ____ Renewal
____ Married Couple (\$50) ____ New ____ Renewal
____ Sponsorship/Donation Amount \$ _____
(TAX ID #95-3823437)

Reason(s) for joining KAC Atlanta (please check all that apply):

____ Community Service
____ Civic Involvement
____ Community Activism
____ Political Awareness
____ Networking Opportunities
____ Social
____ Other: _____

**Are you interested in getting involved with any of the following?
(please check all that apply)**

____ Community Service Projects
____ Cultural Events
____ Fundraising
____ Executive Board
____ Media Relations/Communications
____ Political Affairs
____ Professional Development
____ Social Events

For KAC only

Date: ____/____/____

Payment Method Cash _____ Check # _____ Other _____