

NATIONAL AFRICAN AMERICAN CAUCUS (AFRAM)

MEMBERSHIP APPLICATION



PLEASE PRINT LEGIBLY!!!!

DATE: _____
MONTH DAY YEAR

NAME: _____
FIRST LAST

ADDRESS: _____
STREET ADDRESS

_____ CITY STATE ZIP CODE

EMAIL: _____

PHONE: _____
HOME CELL OTHER

REGION: (CHECK ONE) *Millennial Council members must also check a Region

EASTERN WESTERN CENTRAL SOUTHERN MILLENNIAL COUNCIL

DUES: (Dues year shall be January 1st – December 31st)

ONE YEAR \$20 TWO (2) YEARS \$40 I WISH TO MAKE A CONTRIBUTION. *AMOUNT:* _____

*REBATES per Article IV: National Caucus - \$10 Regional Caucus - \$5 Local Caucus - \$5
 Rebates shall be paid by May 1st of each year based on dues collected by March 31st of each year.*

MEMBERSHIP INFORMATION: (CHECK ALL THAT APPLY)

Retired Member Staff Member Shop Steward

Local Officer: President Vice President Treasurer Secretary

Member Organizer (MO) Member Political Organizer (MPO)

Once complete:

1. Give a copy to your Local Caucus
2. Make check or money order payable to: **AFRAM SEIU**
3. Mail original form and payment to: **AFRAM SEIU c/o Leonard Simpson
 7728 South Cregier Avenue
 Chicago, Illinois 60649**

Visit our website at WWW.AFRAMSEIU.ORG and find us on Facebook!