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FEDERATION OF INDIAN ASSOCIATIONS

CHICAGO, ILLINOIS

PO BOX 393 Elmhurst, IL-60126

ANNUAL FIA PARTNER ASSOCIATION MEMBERSHIP FORM

Name of the FIA Partner Association			
Name of Association Representative			
Address of the Association →	Number	Street	Suite # (P.O. Box)
	City	State	ZIP Code
Telephone →			
E-mail →			
President →			
Telephone →	Cell	Phone	
E-mail →			
Association Representative Signature →			
Date →	Signature		
	MM/DD/YY		

FIA USE ONLY

Date of Membership Received	Personal Check / Money order #
Received Company Check / Personal Check / Money order	Total Membership fee Received \$.
Membership form and dues Received by	Signature Date