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## FEDERATION OF INDIAN ASSOCIATIONS

CHICAGO, ILLINOIS ANNUAL MEMBERSHIP FORM (Year 2020-2021) Name of the Member Name of Association Number Street Suite # (P.O. Box) Address of the Association City ZIP Code State Telephone E-mail President Telephone Cell Phone E-mail Member Signature Signature Date 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 Please fill out the Annual Membership Form along with the membership fee of \$150.00 payable to FIA.