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ANNUAL MEMBERSHIP FORM (Year 2024-2025)

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| Name of the Member : ➡️ |  | | | |
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| Name of Association : ➡️ |  | | | |
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| Address of the Association : ➡️ | Number : ⬇️ | Street : ⬇️ | | Suite # (P.O. Box) : ⬇️ |
|  |  | |  |
| City : ⬇️ | State : ⬇️ | | Zip Code : ⬇️ |
|  |  | |  |
| Telephone : ➡️ | Cell : ⬇️ | | Phone : ⬇️ | |
|  | |  | |
|  |  | |  | |
| Email : ➡️ |  | | | |
|  |  | | | |
| Date : ➡️ |  | | | |

Please fill out the Annual ,Membership Form along with the membership fee of $200.00

payable to FIA or Zelle to [fiachicago2022@yahoo.com](mailto:fiachicago2022@yahoo.com)

Submission of this forms is treated as your acceptance to allow FIA, Chicago to

process your application and it can be treated as your electronic signature.