



BANGLADESH ASSOCIATION OF AMERICA, INC. (BAAI)®
(Washington DC, Virginia, Maryland)
www.baaidc.com

MEMBERSHIP APPLICATION FORM

Applicant to fill out:

Name

First _____ Middle _____ Last _____

Address

Street _____ Apartment # _____

City _____ State _____ Zip Code _____

Telephone

Home (Please check listed/unlisted) _____ Listed Unlisted Mobile (Optional) _____ Work/Others (Optional) _____

Email

Email 1 _____ Listed Unlisted Email 2 (optional) _____ Listed Unlisted

Applying for New / Renewal Term period /Year _____ **Lifetime Member** _____
Please check one Please see the notes below

Payment _____ Check / Cash / Other _____
Amounts in US Dollar

Please sign:

Signature _____ Date _____

Note: Membership fee is \$15.00 per individual for one calendar year (January1-December31) or \$30.00 for two years and onetime fee \$250.00 for a BAAI lifetime member. Please feel free to contact us if you have any question or concern.

** Please make check payable to BAAI and mail it to BAAI, 5 Echo Court, Potomac, MD 20854 or 6850 Fernholly Court, Springfield, VA 22150.*

For Office use only (Please do not write in the box below)

Received Amount: \$ _____ Check # _____ Bank _____ Money order / Cash _____

Membership type _____ Term period _____ Expiration Month/Year _____

Endorsed by _____ **Date** _____
Member, BOD

Comments: