



Filipino American Association of Central Texas

P.O. Box 10861
Killeen, Texas 76547-0861

MEMBERSHIP APPLICATION

TYPE: [] NEW [] RENEWAL [] UPDATE

CLASSIFICATION: [] Individual [] Family

PRIMARY MEMBER NAME: _____
Last Name First Name M.I.

ADDRESS: _____

Home Phone: () _____ **Cell Phone:** () _____

Work Phone: () _____ **Fax:** () _____

Date of Birth: _____ **Birthplace:** _____

E-Mail Address: _____

FAMILY MEMBERS

NAME	RELATIONSHIP	BIRTHDATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Would you like to support and be a member in any of the following committees? [] YES [] NO

- [] Fundraising [] Food and Concession [] Scholarship
- [] Membership [] Decorations [] Sports
- [] Program & Entertainment [] Communications [] Ways and Means
- [] Others: _____

ANNUAL MEMBERSHIP DUES: \$25.00

SIGNATURE: _____ **DATE:** _____

RECRUITED BY: _____

MEMBERSHIP COMMITTEE: Alice Ricky 254-681-3660; Conrad Deocariza 254-290-9938
Visia Carandang 254- 616-2239; Gloria Lopez 254-634-9111 or 254-698-3079