



Chinese American Citizens Alliance Membership Application

(One Applicant per form)

First Name: _____ Mid. Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Mobile Phone Number: _____

E-Mail Address: _____ Preferred Method of Contact: E-Mail SMS Phone

Applicant age is 18 or older? Yes No U.S. Citizenship? Yes No *(U.S. Citizenship required for Regular Membership)*

I declare the above information to be true and correct.

Applicant Signature: _____ Date Signed: _____

Check if above represents an electronic signature

Please mail completed application to: National Lodge Headquarters
Chinese American Citizens Alliance
1044 Stockton Street San Francisco, CA 94108

OR

E-Mail completed application to: info@cacanational.org

Comments: _____

To be completed by Local Lodge:

Lodge: _____

Sponsor 1: _____

Sponsor 2: _____

Date Processed: _____ Dues Amount Collected: _____

Membership Type: Regular Associate Transfer At-Large Student Hold

Certified by: _____

Local Lodge please send the completed application to the following:

Email 1 Copy to info@cacanational.org

Or Mail 1 Printed Copy to National Secretary: National Lodge Headquarters
Chinese American Citizens Alliance
1044 Stockton Street San Francisco, CA 94108