

**The Asian Center of West Michigan**

401 West Fulton Street, Suite 359C  
Grand Rapids, MI 49504  
(616) 331-6592

**Individual Membership Application**

Individual Membership (June 2003 to June 2004) \$15      New\_\_\_\_\_      Renew\_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Please provide the following information (optional) that can help us to help you!

Ethnic Background: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Highest Level of Education: \_\_\_\_\_

Family Information

Spouse/Partner Name: \_\_\_\_\_

Children (s) Name (s): \_\_\_\_\_

Professional/Social Affiliation (s): \_\_\_\_\_

Volunteer Activities

Would you like to volunteer for any of the activities listed below?

Luncheon Series:	Yes	No	Perhaps
Picnic:	Yes	No	Perhaps
Day Camp:	Yes	No	Perhaps
Teacher's Day	Yes	No	Perhaps
Education/Outreach	Yes	No	Perhaps
Women's Health	Yes	No	Perhaps
Cultural Events	Yes	No	Perhaps
Qigong/Energy Therapy	Yes	No	Perhaps
General Volunteer (any)	Yes	No	Perhaps

Mail membership application with check payable to:

**Asian Center of West Michigan**  
401 West Fulton, Suite 359C  
Grand Rapids, MI 49504

Check # \_\_\_\_\_ Date Received \_\_\_\_\_ (Office Use Only)

Telephone: (616) 331-6592, Facsimile: (616) 331-6570