

AMERICAN ARABIC BENEVOLENT ASSOCIATION, INC.
www.aabausa.org

MEMBERSHIP RENEWAL FOR 2007 _____	NEW MEMBERSHIP _____ -----Senior _____ [if Yes, please check] [Check if 60 or older]	
<u>NAME (please print for each individual)</u>	<u>Profession/Expertise (optional)</u>	<u>Dues Amount</u> [\$10.00 per person]
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
Total Due		\$ _____

Mailing Address: _____ - _____, _____
[Street] [City/Town] [State]

If you would like to be put on AABA's e-mail list, either list your e-mail address here or sign up by going onto AABA's web site www.aabausa.org and provide this information - E-Mail Address: _____

I would like to make an additional donation in support of the community activities AABA coordinates:
\$50 _____ \$75 _____ \$100 _____ \$150 _____ \$200 _____ Other--\$ _____

TELEPHONE NUMBER: _____ **Affiliated Church (optional):** _____

TOTAL ENCLOSED: \$ _____ CK / CH If paying by check, please make payable to AABA and mail to AABA, PO Box 320037, West Roxbury - MA 02132

Please disregard this notice if you already paid your annual dues for 2007

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