



# AIEA Membership Application

*“Collaborating to Strengthen Indian Education”*

The Arizona Indian Education Association is a 501(c)(3) non-profit corporation.  
Annual Membership Period: August 1, 2016 – July 31, 2017

New Member     Renewal

**Make check payable to:** ITCA

**Mail to:** Inter Tribal Council of Arizona, Inc.  
c/o: AIEA Membership  
2214 North Central Avenue  
Phoenix, AZ 85004

**MEMBERSHIP TYPE (check one):**

- |  |   |
|--|---|
| <input type="checkbox"/> Private Corporation or Business | \$100.00 annual dues, entitled to two (2) votes maximum |
| <input type="checkbox"/> Local Educational Agency (LEA)  | \$50.00 annual dues, entitled to two (2) votes maximum  |
| <input type="checkbox"/> Tribal Education Program (TEP)  | \$50.00 annual dues, entitled to two (2) votes maximum  |
| <input type="checkbox"/> Other Educational Agency (OEA)  | \$50.00 annual dues, entitled to two (2) votes maximum  |
| <input type="checkbox"/> Individual Membership           | \$25.00 annual dues, entitled to one (1) vote maximum   |

**PRIVATE CORPORATION OR BUSINESS, LEA, TEP, OEA MEMBERSHIP**

Name of Organization/Tribe: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

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

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

**Designated Voter Representatives**

1) Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2) Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**INDIVIDUAL MEMBERSHIP**

Name: \_\_\_\_\_ Tribal Affiliation: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

PAID:     CHECK # \_\_\_\_\_     CASH     PURCHASE ORDER # \_\_\_\_\_