

TAFSUS
Turkish American Friendship Society of the United States
2010 Membership Form
(January 1 – December 31, 2010)

Last Name: _____ **Name:** _____

Profession/Title: _____

Spouse's Name: _____ **Profession/Title:** _____

Mail Address:
Street: _____ Apt. # _____

City: _____ State: _____ Zip: _____

e-mail Address: _____

Telephone:
Home: _____ Work: _____ Fax: _____

Are you interested in volunteering for any TAFSUS related events and activities?
() Fundraising () Educational () Cultural () Public Relations () Social

Please provide contact information for individuals who may be interested in becoming a member: _____

Survey (Optional):

1) Are you a U.S. citizen? Yes: _____ No: _____

2) Number of eligible voters in your family: _____

3) Names and Birthdates of Children:

Payment: please check the applicable items below

() Regular Membership \$ 50/year

() Student Membership \$ 15/year

() Donation _____

Total Enclosed: _____

Please make checks payable to TAFSUS and mail to:

Ibrahim Onaral
3 N. Columbus Boulevard #103
Philadelphia, Pa. 19106

Membership and donations are tax deductible (Tax ID #: 23-2057583)

TAFSUS membership due is payable annually and covers the calendar year. Kindly pay your dues during the month of January.