

# **Yei Education & Development Agency (YEDA)**

## **Membership Application Form**

Only individuals of age eighteen (18) or older are allowed to complete this application form.

### **A. Your Self:**

Name (first) : \_\_\_\_\_ ( last): \_\_\_\_\_

Date of Birth (Month/Day/Year): \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Native Country: \_\_\_\_\_

Occupation: \_\_\_\_\_

### **B. Contact Information:**

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Fax: \_\_\_\_\_

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

My obligation is to make an annual membership donation of \$240.00.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **C. Mailing Information:**

Mail this application form to:

Yei Education & Development Agency  
PO Box 1572  
Salt Lake City, UT 84110

Fax: (801) 957-1897