



# ASIAN PACIFIC ISLANDER ORGANIZATION

## MEMBERSHIP APPLICATION 2010

Name: \_\_\_\_\_  
Position/Title: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Office Phone/Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

### *Optional Information*

Home address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Other NRCS Positions/Experiences: \_\_\_\_\_  
Education: \_\_\_\_\_  
Professional Societies: \_\_\_\_\_

### **Please check type of membership (Jan.-Dec.)**

Student, \$10.00

New, \$25.00

Renewal, \$25.00

Life, \$250 if paid in one installment

\$300 if paid in three installments

**Please mail membership form and  
check, payable to APIO, to:**

Asian Pacific Islander Organization  
PO Box 2391  
Billings, MT 59103

Please make your  
check payable to APIO.

**Check out the APIO web site at [www.apio.org](http://www.apio.org).**