



Asian American Group

Membership Application Form

ATTN: Mike Vaswani
3667 Dutch Valley Dr. Las Vegas, NV 89147
FAX: 702-242-8516
www.asianamericangrouplv.com

Annual Individual Membership \$10

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Cell: _____
Email: _____

Company Name: _____
Title: _____

Ethnicity/Community: _____
Language: _____

Please make check payable to Asian American Group (AAG)

Name: _____
Signature: _____ Date _____

FOR OFFICE USE ONLY

AAG MEMBERSHIP APPLICATION RECEIPT

Received from _____

Payment for [Organization | Individual] Membership Fee

Amount Paid \$ _____ Date: _____