



## 波士顿亚美联谊会 | Asian American Association of Boston

### 会员申请表格 | Membership Application Form

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#### 申请人信息 | Applicant Information

姓名	Full Name: _____
地址	Applicant Address: _____
电话号码	Phone Number: _____
电邮	Email: _____
出生日期	Date of Birth: _____

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#### 会员类型 | Membership Type / Please select one 选择其一

- |                                  |              |
|----------------------------------|--------------|
| <input type="radio"/> 成人         | Adult        |
| <input type="radio"/> 学生         | Student      |
| <input type="radio"/> 长者 (65岁以上) | Senior (65+) |
- 

#### 参与方向 | Areas of Interest / Involvement

- |                             |                      |
|-----------------------------|----------------------|
| <input type="radio"/> 志愿服务  | Volunteering         |
| <input type="radio"/> 筹款与活动 | Fundraising & Events |
| <input type="radio"/> 倡导与推广 | Advocacy / Outreach  |
| <input type="radio"/> 教育与培训 | Education / Training |
| 其他: _____                   | Other: _____         |
- 

#### 捐款 (自愿) | Donation (Optional)

You generous donation helps support our programs, events, and community initiatives.

慷慨的捐款将支持我们的项目、活动和社区计划。

\$25 \$50 \$100 其他 / Other: \$ \_\_\_\_\_

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#### 会员协议 | Membership Agreement

I understand that by signing this form, I agree to support the mission and values of the Asian American Association of Boston and will abide by the membership rules and policies.

本人理解并同意, 通过签署此表格, 我将支持波士顿亚美联谊会的使命与价值观, 并遵守相关会员守则与规定。

签名 / Signature: \_\_\_\_\_

日期 / Date: \_\_\_\_\_

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#### 联系方式 | Contact Information

Boston: 70 Kneeland Street, Boston, MA 02111

Quincy: 440 Hancock Street, Unit #8, Quincy, MA 02171

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Email: info@aaaboston.org

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Website: www.aaaboston.org