

NATIONAL FEDERATION OF INDIAN-AMERICAN ASSOCIATIONS (NFIA)



APPLICATION FOR NFIA MEMBERSHIP

[January 01, 2019-December 31, 2020]

(The information provided in this application will be used for NFIA purposes only)

Applicants seeking NFIA membership should select **only one** membership category below. **Complete all relevant requirements/items** and then submit the completed application form by postal mail with necessary documents along with the applicable membership fee (a check of \$50 for **two years** under Categories I or II applicants, or a check of \$1,000 for Life under Category III applicants) to the NFIA Executive Director at 19300 Tattershall Drive, Germantown, MD 20874. For complete details about eligibility and requirements, please see the 3rd page of this form, and also read relevant Articles of NFIA bylaws (www.nfia.net). **[Please note that the NFIA membership application is subject to verification and approval by its Board. The NFIA Board reserves the right to revise the membership fee and schedule with due process. The submission of an incomplete application may delay its consideration or approval].**

A: NEW APPLICATION [], or RENEWAL APPLICATION [] DATE:

B: [] CATEGORY I: INDIVIDUAL ASSOCIATION/ORGANIZATION (Membership fee of \$50)

Name of Your Assoc./Org. No. of Individual Members:

State in which Registered (Reg.): City:Currently Reg.? Yes [] or No []; Reg. No.:

Year of Reg. Federal Tax Exempt Status: Yes [] or No []; Web-site Address:

Membership Fee Enclosed: Yes [] or No []; If no, why not?

[] CATEGORY II: UMBRELLA ORGANIZATION/FEDERATIONS (Membership fee of \$50)

Name of Your Organization: No. of Assoc. Members:

If You are an umbrella/national organization with chapters of its own, provide the number of chapters:

Federal Tax Exempt Status: Yes [], or No [], If yes, Fed. EID No.: If no, is your organization currently

Registered (Reg.) with a State? Yes [] or No [], State in which Reg. City:.....Year of Reg.:

Reg. No.: Web-site Address: Membership Fee Enclosed: Yes [] or No []; If no, why not?

[] CATEGORY III, INDIVIDUAL LIFE MEMBERSHIP (Membership fee \$1,000)

Name of Applicant: Name of Spouse:

Street Address: City: State: Zip Code:

Phone Number: (C) (H) E-mail address: Name of a person or
Assoc. referring you to NFIA: Membership Fee Enclosed: Yes [] or No []; If no, why not?
.....

C: CONTACT INFORMATION (Category I and II):

Details of Current Principal/CEO (President/Chairman/Exe. Director):

Name: Title:
Street Address..... City State Zip
E-Mail address: Phone Number: (Cell) (Home)

D: DETAILS OF CURRENT EXECUTIVE COMMITTEE /OFFICERS:

- A. Principal: Phone: () ____ - ____ ; E-Mail:
B. Ex. VP or VP: Phone: () ____ - ____ E-Mail:
C. Secretary: Phone: () ____ - ____ E-Mail:
D. Treasurer: Phone: () ____ - ____ E-Mail:
E. Other: Name: Phone: () ____ - ____ E-Mail:

Terms of officers: From To For longer terms (>3 yrs.), Explain:

E: DELEGATES/REPPRESENTATIVES OF APPLICANT: – Bylaws Sections 3.126, 6.130, 11.2, 12.111

Please indicate below the **name**, **e-mail address** and **phone number** of your designated delegates/representatives [a maximum of two (2) names for **Category I** (see bylaws, Section 6.130); a maximum of five (5) names depending upon the number of your Assoc./Chapter members for **Category II** (Section 6.131); and a maximum of one (1) name for the **Life** membership under **Category III** (Section 3.126)] who will participate/support the NFIA activities including meetings, conventions, election, and any other NFIA programs. A Life member may with permission be represented by his/her spouse. **[Please note that NFIA Board reserves the right to adjust the number(s) below after screening and due diligence by the Board]:**

1. Name: City: E-mail: Phone: () ____ - ____
2. Name: City: E-mail: Phone: () ____ - ____
3. Name: City: E-mail: Phone: () ____ - ____
4. Name: City: E-mail: Phone: () ____ - ____
5. Name: City: E-mail: Phone: () ____ - ____

F: SIGNATURE NEEDED:

Signature of the Applicant (Life Member or the current Principal/CEO of applicant organization) is required below. In the absence of the Principal of an organization, current Executive Committee member/officer may sign instead with a reasonable written explanation: Explain:

.....

Signature (above)

Print your name (above)

Title (above)

Date:

City:**State:****Country:**.....

G: ELIGIBILITY FOR APPLICANTS (CATEGORIES I & II) – Bylaws Sections 3.121, 3.125, 6.130,6.131, etc.

Any Individual Indian-American organization/association or Umbrella org./Federation which satisfy all of the following criteria is eligible for NFIA membership with voting rights in NFIA elections/meetings/convention, etcetera:

1. The applicant organization/association has been in operation in the USA for a minimum of One (1) year;
2. Functions under its duly written Constitution/Bylaws;
3. Elects its officers at regularly as laid down in its Constitution/Bylaws;
4. Is a “Not-for Profit” organization/association. Note: A current federal tax-exempt status (bylaws, Section 3.125) is required from an Umbrella organization applicant. A current State Registration (bylaws Sect. 3.121d) is required from an individual Association applicant;
5. Subscribes to the objectives of NFIA Constitution/Bylaws;
6. Agrees to pay the prescribed NFIA membership dues by its own organizational/association check;
7. Has a minimum of 25 members for Category I applicants; and more than 10 association members for Category II applicants. [Note: Legitimate and currently active Umbrella organizations with 10 or less association members of its own are also welcome to seek NFIA membership. Such applicants may be admitted into NFIA at the discretion/review of the NFIA Board.]

H: ELIGIBILITY FOR LIFE MEMBERSHIP (CATEGORY III) – Bylaws Sections 3.126

Any individual who is recommended by a NFIA officer or member association/organization who subscribes to the objectives of the NFIA, and who submits the one time required fee of \$1,000, is eligible for Life membership. Once the membership is approved, the Life member is entitled to all applicable privileges as granted by the NFIA bylaws.

I: REQUIREMENTS FOR NEW APPLICANTS (CATEGORIES I & II MEMBERSHIP)

As prescribed in the NFIA bylaws, an organization/association seeking **NEW (Categories I or II) Membership** to the NFIA **must submit** its application on this prescribed form along with the following documents (checklist below) by postal mail within the stipulated deadline. However, an advance copy may be sent electronically by the Applicant as long as the **original** application is USA postmarked and received by the NFIA within or by a specified (by NFIA) date:

1. Provide a copy of the current Articles of Incorporation or your Constitution/ Bylaws: Select Yes [] or No []
2. Provide a current list of elected officers, their term of office and titles, mailing and e-mail addresses and phone numbers if not already mentioned under item D “Executive Committee/Officers”: Yes [] or No []
3. Membership fee of \$50.00 paid with the organizational/association check: Yes [] or No []
4. Individual Association/organization applicants **must provide State registration** for record. Yes [] or No []
5. Umbrella organization applicants **must provide** Federal Tax Exemption EID No.: Yes [] or No []. In the absence of EID No., the current State registration should be provided: Yes [] or No [] with explanation along with a request for a special consideration. If No, Explain:

J: NOTES: (1) For eligibility and detail requirements, applicants under all categories are encouraged to also consult the NFIA bylaws, especially Articles III, IV, V, VI, XI, XII, etc. on www.nfia.net and comply with all the requirements. (2) Your signature under item F testifies the authenticity of the information provided herein to NFIA. By signing this document, you also agree to serve NFIA and subscribe to NFIA objectives and bylaws.

K: COMPLETED APPLICATION SHOULD BE SUBMITTED TO THE FOLLOWING:

Dr. Hari Har Singh, NFIA Executive Director, 19300 Tattershall Drive, Germantown, MD 20874

Phone: (301) 972-3944, E-Mail: harisomasingh11@yahoo.com

L: HOW WOULD YOU LIKE TO SERVE/SUPPORT NFIA? – Please mark a maximum of three (3) areas of your interest/expertise:

Public Relations; Membership Drive Fund Raising; Bylaws Committee;

Congressional Events; Advocacy; Political Education/Voter registration; Senior Citizen;

Youth; Women; Public Policy; Newsletter; Business/Commerce.....;

Seminars/Conferences/Events; Communications; PIO/NRI Affairs;

Charity/Philanthropy; Cultural Events; Performing Arts; Spelling Bee;

Math & Science Talent; Geography Bee; India-US Relations; Indo-American Issues.....Be a

Donor..... Other (Explain)

M: APPLICANT USE ONLY: ADDITIONAL SPACE BELOW FOR EXPLANATIONS/CLARIFICATIONS TO BE USED BY APPLICANTS (If space is not enough you may use a plain paper to write and attach with this application):

DO NOT WRITE BELOW:

N: NFIA USE ONLY: THIS SPACE IS ONLY FOR NFIA REVIEW/COMMENTS/REMARKS

REVIEW BY THE NFIA EXECUTIVE DIRECTOR:

REVIEW BY THE NFIA MEMBERSHIP COMMITTEE:

REVIEW BY THE NFIA BOARD:
