



AMERICAN HUMANIST ASSOCIATION

1777 T Street, NW • Washington, DC 20009-7125 • 800-837-3792 • Fax 202-238-9003 • AHA@AMERICANHUMANIST.ORG

Application For

AFFILIATE OF THE AHA

The undersigned hereby apply to become an affiliate of the American Humanist Association to be known as the

Affiliate Name: _____ Date: _____

AFFILIATE CONTACT INFORMATION

Name of Affiliate Leader: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____

AFFILIATE MEMBERS

1. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE

4. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE

2. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE

5. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE

3. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE

6. _____
SIGNATURE

NAME (Please Print)

ADDRESS

CITY

STATE ZIP PHONE