

TAIWANESE ASSOCIATION OF AMERICA PITTSBURGH CHAPTER
全美臺灣同鄉會匹茲堡分會
MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name (Chinese):		
Name (English):		Place of Birth (台灣出生地):
Email :		
Mobile Phone:		Home Phone:
Current address:		
City:	State:	ZIP Code:

EMPLOYMENT INFORMATION

Occupation:

SPOUSE INFORMATION

Name (Chinese):	
Name (English): First Name	Last Name:
Email :	Mobile Phone:

CHILDREN IF MEMBERSHIP PRIVILEGES DESIRED

Name:	Name:
Name:	Name:
Name:	Name:

HOW DID YOU HEAR ABOUT US?

A friend, Name: _____
 Facebook
 TAA Website
 Other: _____

VOLUNTEER

If you want to be volunteer at TAA Pittsburgh, please check the area you are interested in

Music: <input type="checkbox"/>	Sport: <input type="checkbox"/>	Event Activity: <input type="checkbox"/>
Graphic Design: <input type="checkbox"/>	Social Media Communication: <input type="checkbox"/>	Children Activity: <input type="checkbox"/>
Calligraphy: <input type="checkbox"/>	Photography: <input type="checkbox"/>	Transportation: <input type="checkbox"/>

Other: Please describe:

COMMENT
