

MEMBERSHIP FORM

UNA-USA membership is open to individuals who have a U.S. address

	lect your desired member: ed with each category, plea			ow. For a f	ull list of	the be	enefit	s		
\$25 Yo	ung Professional (must b	e ages 18-30)	\$250	Silver Lev	el Memk	pershi	р			
\$50 Sta	Standard Membership \$500 Gold Level Membership									
\$100 Bro	\$1,000 Lifetime Membership* *must be paid in full with one-time payment; no renewal - ever									
	Youth Membership (ages www.unausa.org/join		Fixed Income to membersh							
Member Personal Information Please complete all of the information fields below Date O					Date of birth is required for YPs					
Mr.	Mr. Mrs. Dr.				ММ	D	D	Υ	Υ	
Full Name										
Street Address										
City				State						
Zip Code	Phone Number									
Email										
Membership Type: Member-At-Large Chapter Member:										
Payment	Information									
Please check to	he box If you are paying by credit	card and your mailing add	dress is the same c	ns your billing	address					
PAY BY CREDIT CARD				Р	PAY BY CHECK					
Name (as on card)						Complete this form and mail with your check to:				
Billing Address						UNA-USA				
Credit Card Nur	mber				c/o United Nations Foundation P.O. Box 236					
Expiration Date		CVV			Washington, D.C. 20006					