AISES

APPLICATION/PETITION FOR THE ESTABLISHMENT
OF A TRIBAL CHAPTER

Name of Chapter: _________________________________________________________

Chapter President: ________________________________________________
(Chapter President must be a General Member of AISES. All other officers can be General or Associate.)

Business Address
Of Chapter: _____________________________________________________________

City: ________________________________ State/Province: __________

Country: ___________________________ Postal Code: _______________________

Phone: ____________________________ Fax: ____________________________

Email: ______________________________

Number of Members in Chapter: __________
(A tribal chapter must have at least 1 AISES member in good standing. Please complete the attached members list and ensure all individuals are active AISES members. Contact AISES Membership at 505-765-1052, if you have membership questions.)

We, the tribal chapter members and our Chapter President, have read, understood, and accepted the duties and responsibilities set forth in the Code of Conduct, Tribal Chapter Bylaws and Affiliate Agreement for the Tribal Chapters of AISES.

_________________________________________ Date

Signature of Chapter President

You will be notified upon completion of review and approval by the AISES Engagement and Advocacy Department.

Return Completed Form to:
Engagement and Advocacy Department
6321 Riverside Plaza Lane NW, Unit A
Albuquerque, NM 87120

Or email to: engagement@aises.org
AISES Tribal Chapter Members List
At least 1 AISES member, in good standing, must be listed for consideration.

Please list Tribal Chapter Members here (add more lines if needed):

1. Name:______________________________________________________________
   Email:_________________________ Phone:_________________________

2. Name:______________________________________________________________
   Email:_________________________ Phone:_________________________

3. Name:______________________________________________________________
   Email:_________________________ Phone:_________________________

Contact the Membership Department at (505) 765-1052 if there are any questions.