



586-756-1350 – www.semii1975.org
MEMBERSHIP APPLICATION

MEMBER

Article III, Section 1 - A Member shall be a North American Indian as described in **Article I, Section 2**, and recognized by a majority of the Board of Directors of this organization.

Article I, Section 2

A North American Indian is defined as a Member of their tribe based upon their stated tribe's membership criteria and evidenced by a membership card or documentation.

The President and Board of Directors must be Members as defined in **Article III, Section 1**

Only Members, whose Membership is current, are eligible to be nominated and Elected as officers

Only Members in good standing, over eighteen (18) years of age are eligible to vote in any election

ANNUAL MEMBERSHIP DUES

Member	\$10.00
Associate Member	\$ 5.00
Seniors	\$ 1.00



ASSOCIATE MEMBER

An Associate Member shall be any individual sponsored by a Member of this organization and recognized by the Board of Directors.

An Associate Member shall show desirable purpose to contribute significantly to the organization.

Associate Members are not eligible to run for election for the Board of Directors

Associate Members are not eligible to vote in any election

LIFETIME MEMBER

This classification of Membership is limited to those individuals who paid for Lifetime Membership. *Eligibility to hold Board positions and voting is limited to Member and Associate Membership qualifications*

NAME: _____

STREET ADDRESS _____

CITY STATE/PROV ZIP CODE

HOME TELEPHONE _____

CELL TELEPHONE _____

WORK TELEPHONE _____

EMAIL ADDRESS: _____

CHILDREN	Name	Birth Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

MEMBERSHIP APPLYING FOR

- Member*
- Associate Member
- Sponsored by _____
- Lifetime Member

- Date of Birth _____

- Veteran
- Disability
- Senior (Age 65 and up)
- Married – Anniversary Date _____
- Single

*If you are making application for "Member", please attach copy of Tribal Membership Card, Band Letter, or Letter from the Department of Interior, Bureau of Indian Affairs & your dues

Please be advised that the Membership Committee does verify tribal memberships

Have you been convicted of any felonies? If so, please describe: _____

Many of our Members and Associate Members are active volunteers with SEMII. Our insurance company requires that we run background checks on pending members. Please be advised we will run criminal background checks on all applicants

FOR MEMBERSHIP COMMITTEE USE ONLY

MEMBERSHIP COMMITTEE

NOTES

Dues Paid

Amount \$ _____

Cash Check # _____

Received by _____

Date _____

Membership Check

OTIS Check

Reviewed by:

Approved by:

Date: _____

Membership Classification Approved

Member

Associate

Lifetime

MEMBERSHIP NUMBER: _____