

# Membership Application Form

## Student Application Form

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

College/University \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Phone # (a) Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Other \_\_\_\_\_

E-mail (if available) \_\_\_\_\_

## Individual/Family Application Form

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Applying for Family membership? (NO) (YES) If yes, what is

Spouse's First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Phone # (a) Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Other \_\_\_\_\_

E-mail (if available) \_\_\_\_\_

Spouse's E-mail (if available) \_\_\_\_\_

Upon completion of this form, send it to

The Nigerian Cultural Association, Inc.  
64 Springville Street  
Amherst, New York 14215