

# IGBO UNION OF NEW MEXICO

## Membership Application Form



**NOTE: Membership application is free. However, all applications must be accompanied with a 3 month due payment. Monthly due is \$10 per month per member. No family membership**

**zelle all payments to [iunmreal@gmail.com](mailto:iunmreal@gmail.com) ensure to specify 1st time monthly dues**

### Candidate information (Home)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State ZIP \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Candidate work information (optional)

Company \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State ZIP \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### APPLICATION TYPE

New Membership

Reinstatement

### The date you want your membership to be effective

Start Date:

Amount enclosed \$

zelle payments to [iunmreal@gmail.com](mailto:iunmreal@gmail.com)

### How did you hear about us?

\_\_\_\_\_

### Statement of understanding

By applying for membership to the Igbo Union of New Mexico I agree to be bound by all the provisions of its constitution and Bye laws

Name / Signature

Date

### Membership Status

APPROVED

DENIED

If denied give reason

Signature of President of IUNM or Designee

Date: