



**AREAEB**  
**Membership Application**

Mail form and check (payable to "AREAEB") to:

**c/o: Wai-Yew Lam**  
**155 Grand Avenue, Suite 105**  
**Oakland, CA 94612**  
**Tel: 925-212-1727**

Membership Types:

Check box that apply

Pioneer	\$50	<input type="checkbox"/>
Affiliate	\$50	<input type="checkbox"/>
General	\$35	<input type="checkbox"/>

Date \_\_\_\_\_

Name \_\_\_\_\_

Company \_\_\_\_\_

Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_