



National Alliance of Black Interpreters

Metro Chicago Chapter

2007 Membership

First Name:	MI.	Last Name:
-------------	-----	------------

Address:

City:	State:	Zip Code:
-------	--------	-----------

Email:

Home Phone:	Voice: ____ Y ____ N	TTY: ____ Y ____ N
-------------	----------------------	--------------------

Work Phone:	Voice: ____ Y ____ N	TTY: ____ Y ____ N
-------------	----------------------	--------------------

Fax:	Pager:
------	--------

<b>MEMBERSHIP</b>	<b>CATEGORIES</b>
-------------------	-------------------

**\_\_\_\_\_ Full Membership: \$20.00**  
 An active African American/Black interpreter currently providing professional interpreting services on a part-time or full-time basis and receiving compensation for said services. A Full Member in good standing of the organization shall have one vote in elections and business that may come before the membership.

**\_\_\_\_\_ Student Membership: \$15.00**  
 An active African American/Black student as defined in the bylaws of the National Alliance of Black Interpreters, Inc.-Metro Chicago Chapter. Student Members cannot vote, but are encouraged to participate in the activities and discussions of the organization.

**\_\_\_\_\_ Individual Supporting Membership: \$20.00**  
 Any individual actively supporting the mission and goals of this organization. Supporting Members cannot vote, but are encouraged to participate in the activities and discussions of the organization.

**\_\_\_\_\_ Organizational Supporting Membership: \$50.00**  
 Any organization actively supporting the mission and goals of this organization.

I understand and adhere to RID's Code of Ethics    \_\_\_\_ Yes    \_\_\_\_ No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Make checks payable to: **NAOBI Metro Chicago** and mail to NAOBI MCC, PO, 208752, Chicago, IL 60620

For Office Use Only		
Date Rec'd: _____	Amount: _____	Check #: _____
Membership #: _____	Other information: _____	