



WORLD AFFAIRS COUNCIL OF INLAND SOUTHERN CALIFORNIA

MEMBERSHIP APPLICATION FORM

Print and send (with payment information) to address below or pay online at <http://wacinlandsocal.org>

**P.O. Box 1268
RIVERSIDE, CA 92502
FAX (951) 684-8283**

Name _____

Company/Organization _____

Daytime Phone or Cell () _____ **Email** _____ **Fax** _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Billing Address (if different from above) _____

City _____ **State** _____ **Zip** _____

SELECT MEMBERSHIP TYPE

Membership Type	Cost	Membership Type	Cost
Student Member <ul style="list-style-type: none"> • Individual (requires valid student ID) 	\$20	Supporting Member <ul style="list-style-type: none"> • Individual • Couple 	\$100 \$150
Regular Member <ul style="list-style-type: none"> • Individual • Couple 	\$50 \$75	Consul Level Member <ul style="list-style-type: none"> • Individual • Couple 	\$250 \$375

PAYMENT OPTIONS

I have enclosed a check in the amount of \$ _____

OR

Charge the total \$ _____ to my (please check one): VISA MASTERCARD AMEX

Card # _____ Expiration Date ____/____ 3 or 4 digit code _____

Signature: _____

Please note: Billing Address, phone number, and signature must be filled in if using a credit card.

For more information, you can call (951) 684-8283 or email us at christine.worldaffairs@gmail.com