

# AEA Membership Application Form



- Please send the completed form to Amy Fong (admin@asiaea.org), copy to Bambang Budijanto (gs@asiaea.org).
- Please attach your recent organizational structure.
- Attached a copy of your latest bylaw and constitution (when applicable).

**Thank you for taking time to complete your application carefully and we look forward to welcoming you to AEA.**

## ORGANIZATION INFORMATION

Types of AEA Membership

Types of Application

PLEASE MARK  IF THERE ARE NO DATA CHANGES IN THE FIELDS BELOW

Full Name of Organization

Registered in which countries?

Year Founded

Address

Zip Code

Mailing Address (if different from above)

Tel

Fax

Other Phone

Email

Social Media Facebook

Instagram

Twitter

Others

Executive Director

Title (if different)

Chairman

Title (if different)

Mission Statement

**For Associate Members Only:** Countries in Asia where the organization is currently working:

- |                                      |                                     |                                      |                                       |                                       |
|--------------------------------------|-------------------------------------|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Afghanistan | <input type="checkbox"/> Hong Kong  | <input type="checkbox"/> Kyrgyzstan  | <input type="checkbox"/> Oman         | <input type="checkbox"/> Tajikistan   |
| <input type="checkbox"/> Armenia     | <input type="checkbox"/> India      | <input type="checkbox"/> Laos        | <input type="checkbox"/> Pakistan     | <input type="checkbox"/> Thailand     |
| <input type="checkbox"/> Azerbaijan  | <input type="checkbox"/> Indonesia  | <input type="checkbox"/> Lebanon     | <input type="checkbox"/> Philippines  | <input type="checkbox"/> Timor-Leste  |
| <input type="checkbox"/> Bahrain     | <input type="checkbox"/> Iran       | <input type="checkbox"/> Macau       | <input type="checkbox"/> Qatar        | <input type="checkbox"/> Turkmenistan |
| <input type="checkbox"/> Bangladesh  | <input type="checkbox"/> Iraq       | <input type="checkbox"/> Malaysia    | <input type="checkbox"/> Saudi Arabia | <input type="checkbox"/> UAE          |
| <input type="checkbox"/> Bhutan      | <input type="checkbox"/> Israel     | <input type="checkbox"/> Maldives    | <input type="checkbox"/> Singapore    | <input type="checkbox"/> Uzbekistan   |
| <input type="checkbox"/> Brunei      | <input type="checkbox"/> Japan      | <input type="checkbox"/> Mongolia    | <input type="checkbox"/> South Korea  | <input type="checkbox"/> Vietnam      |
| <input type="checkbox"/> Cambodia    | <input type="checkbox"/> Jordan     | <input type="checkbox"/> Myanmar     | <input type="checkbox"/> Sri Lanka    | <input type="checkbox"/> Yemen        |
| <input type="checkbox"/> China       | <input type="checkbox"/> Kazakhstan | <input type="checkbox"/> Nepal       | <input type="checkbox"/> Syria        | <input type="checkbox"/> Other:       |
| <input type="checkbox"/> Georgia     | <input type="checkbox"/> Kuwait     | <input type="checkbox"/> North Korea | <input type="checkbox"/> Taiwan       | <input type="text"/>                  |

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**For Associate Members Only:** Area(s) of activity:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Bible Translation/Engagement   | <input type="checkbox"/> Literatures/Publishing    | <input type="checkbox"/> Sports and Arts                              |
| <input type="checkbox"/> Children and Teens             | <input type="checkbox"/> Leadership and Management | <input type="checkbox"/> Theological Educations and Mission Trainings |
| <input type="checkbox"/> Church Networks                | <input type="checkbox"/> Market Place              | <input type="checkbox"/> Theological Issues                           |
| <input type="checkbox"/> Church Plantings               | <input type="checkbox"/> Media and Technology      | <input type="checkbox"/> Women  |
| <input type="checkbox"/> Disabilities and special needs | <input type="checkbox"/> Men                       | <input type="checkbox"/> Youth and Young Adult                        |
| <input type="checkbox"/> Displaced People               | <input type="checkbox"/> Missions (Cross Cultural) | <input type="checkbox"/> Other  |
| <input type="checkbox"/> Educations in General          | <input type="checkbox"/> Poverty Alleviation       |   |
| <input type="checkbox"/> Family                         | <input type="checkbox"/> Relief and Disaster       |   |
| <input type="checkbox"/> Government and Public Sphere   | <input type="checkbox"/> Religious Freedom         |   |
| <input type="checkbox"/> Health                         | <input type="checkbox"/> Research and Publication  |   |

## CONTACT DETAIL

### Contact Person

PLEASE MARK ✓ IF THERE ARE NO DATA CHANGES IN THE FIELDS BELOW

Gender

Title      Dr.      Mr.      Mrs.      Ms.      Professor      Other

First Name       Middle Name

Last Name

Position       Email

Telephone       Fax

Mobile Phone/WA

**I am an authorized representative of this organization and I affirm that all information submitted on this form is true and accurate.**

Print name

Signature

Date (MM/DD/YYYY)