



PAAM

★ Pacific Islander-Asian American Ministries ★
Northern California-Nevada Conference ★ United Church of Christ

Friends Of PAAM Membership Application

DATE _____

NAME _____

HOME
ADDRESS: _____

EMAIL: _____ CELL#: _____

LOCAL CHURCH _____
(if applicable)

*Please complete this application and mail to the address below.
Membership is a minimum of \$25.00 per calendar or fraction thereof,
and can be donated on line at
www.NCNC-PAAM.org*

Or

*Mail check payable to PAAM NCNC and mail to
PAAM NCNC
2342 Shattuck Ave., #311
Berkeley, CA 94704-1517*

OFFICE USE

\$AMT REC'VD _____ CK# _____ CASH _____ DATE _____

**Your continued support of NCNC PAAM is greatly
appreciated!**