NAACUS  
National Association of African Catholics  
in the United States  

MEMBERSHIP REGISTRATION FORM

Personal Information
Prefix:  
□ Mr.  □ Mrs.  □ Ms.  □ Dr.  □ Most Rev.  □ Msgr.  □ Rev.  □ Sr.  □ Bro.  
□ Deacon  □ Other:  

First name:  
Last name:  

Address:  

City:  
State:  
Zip code:  

Home number:  
Mobile number:  

Email address:  

Region:  
Arch/Diocese:  

Country of origin:  
Occupation/Profession:  

Payment options:  
Check #:  
Money Order #:  
Cashier's Check #:  
Traveler's Check #:  

All members shall be considered registered after paying their annual dues as listed below:  
□ Individual Membership: $ 20.00  
□ Group Membership:  
Name of Group:  

2-100 members........$ 200.00  
100+ members........$ 300.00  

Annual dues will be due on the first day of the particular year in question.  
Each person, or Regional Organization or Regional Chapter shall submit its annual dues to the NAACUS Office.

Remit To:  NAACUS  
c/o Sr. Joanna Okereke  
P. O. BOX 29416  
Washington, DC 20017  
Phone: (202)541-3359  
Email: naacus@gmail.com