



ARMENIAN YOUTH FEDERATION

Youth Organization of the ARF • Eastern USA • Central Executive

ՀԱՅ ԵՐԻՏԱՍԱՐԴԱՅ ԴԱՇՆԱԿՑՈՒԹԻՒՆ

ՀՅԴ Երիտասարդական Միութիւն • Արեւելեան ԱՄՆ • Կեդրոնական Վարչութիւն

JUNIOR APPLICATION

Chapter: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_

To what organizations do you belong? \_\_\_\_\_

Have you even been a member of an ARF *Badanee*/Junior Organization? \_\_\_\_\_

If YES, where? \_\_\_\_\_ When? \_\_\_\_\_

How did you hear about the AYF? \_\_\_\_\_

What activities interest you? \_\_\_\_\_

Languages Spoken: \_\_\_\_\_

*I make this application of my own free will and hereby attest that the above information is correct.*

FOR CHAPTER USE ONLY

Date of Approval/Oath: \_\_\_\_\_

Chapter President: \_\_\_\_\_

Chapter Secretary: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_