



INTERNATIONAL OFFICE OF CHAMPA

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BOARD OF ADVISORS

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Sec. General: Mr. Qasim Tu
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(714) 797-7400

Treasurer: Mr. Vincent Kieu
kvchampa@yahoo.com
(408) 281-4775

Application for Membership

Name: _____
[Last] [Middle] [First]

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ [Home] [Cell]

I, hereby, fully comply with the by-laws of IOC-Champa and would like to become:

☐ an active member of the IOC-Champa

☐ a sympathisant member of the IOC-Champa

Enclosed here with is cash _____ or check _____ for \$120/annual membership fee.

Signature: _____

Date: _____