

APPLICATION FOR AFFILIATION WITH CAA

ORGANIZATION		
Name and Acronym if Used		
Date Established	Annual Dues	Number of Members
Names and Titles of Elected Officers	5	Names and Titles of Appointed Officers
	_	
	_ 	
Statement of Purpose (25–50 words)		
What scholarly/artistic activities does this org	ganization un	ndertake?
SUBMITTED BY:		
	Posi	
Name		ition
Address		
Signature	Date	e
Phone	Ema	ail
Please submit the following with this applicati Membership mailing list (optional) Constitution and/or By-laws Sample publications (e.g. membership brown please fill out this form digitally and email to requestions? Call 212-691-1051.	ochure, catalo	