



Association Membership Application Form

Please provide the following information about your association:

Country		
Association Name Full Name & Acronym		
Association Website		
Executive Board Please provide Name, Title, Affiliation and E-mail for each member and indicate when the term of office for each member expires	President	
	Vice-President	
	Secretary	
	Treasurer	
	Member at Large	
	Other	
	Other	
Most recent Annual Conference date dd/mm/yyyy		
Forthcoming Annual Conference date dd/mm/yyyy		
Membership Size number of current members		
Recent Publication(s) by the Association e.g., Journal, Conference Proceedings, Research Series, etc.		

<p>Profile If there are other associations or organisations in your country that are in the field of applied linguistics, please explain how is your association different to them.</p>	
<p>National Registration Provide information and attach evidence about the registration of your Association with the relevant authorities in your country</p>	
<p>Membership Annual Fee in your currenacy and US\$</p>	
<p>AILA Fee Payment Method Credit Card, Bank Remittance, other? Please Note: You will be expected to pay your AILA membership fees in January of each calendar year.</p>	
<p>Comments Requests, Feedback for the AILA Executive Board</p>	

Contact Person

Title	
First Name(s)	
Surname	
Position/Occupation	
Institution	
Postal Address	
City	
Country	
Telephone	
Fax	
Email address	
Date, Signature	

Please complete the form and return to: secretariat@aila.info