

IRAQI AMERICAN CULTURAL CENTER (IACC)

Registered California Non-Profit Organization • Entity 6104998

Website: www.IraqiAmerican.org

SECTION 1: APPLICANT INFORMATION

Full Name: _____

Date of Birth: ____ / ____ / ____

Primary Phone: _____ (☐ Check to receive text updates)

Primary Email: _____

Mailing Address: _____

SECTION 2: MEMBERSHIP TIER SELECTION

All tiers cover a mandatory 12-month period, payable one calendar year in advance on the 1st of your enrollment month.

☐ **Regular Membership** – Standard annual dues apply

☐ **Gold Membership** – Enhanced community operational contribution

☐ **Platinum Membership** – Premium heritage preservation contribution

☐ **Optional:** I would like to add a voluntary additional donation of \$_____ to the IACC annual budget.

SECTION 3: TERMS, LEGAL CONSENT & CODE OF CONDUCT

By signing below, I agree to the following structural bylaws of the IACC:

- 1. Behavioral Code:** I agree to conduct myself in a prescribed manner that honors our proud history, heritage, and foundational humane values.
- 2. Media Control:** I grant the IACC permission to request my explicit consent before using my photography, image, or media likeness in external advertising.
- 3. Name Usage:** I understand that I am strictly prohibited from using the IACC name, logo, or asset cache for independent articles, speeches, or public advertising without explicit approval from the Board of Directors.
- 4. Data Privacy:** My personal information will be safely maintained within the internal communications filing system and will never be utilized outside official IACC programmatic purposes.

Applicant Signature: _____

Date: ____ / ____ / ____

FOR INTERNAL BOARD USE ONLY

Date Received:

Board Vote Status:

Date Welcome Packet Sent:

☐ Approved ☐ Declined
