



# Membership Application

**Full Name:** \_\_\_\_\_  
Last First Middle

**Education:**

Undergraduate \_\_\_\_\_  
School Degree Year

Graduate \_\_\_\_\_  
School Degree Year

Graduate \_\_\_\_\_  
School Degree Year

**Current Position:**

Title: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Phone Type: Home ( ), Mobile ( ), Office ( )

E-mail Address: \_\_\_\_\_ *A receipt and future Kafa communications will be emailed to this address.*

Fields of Specialization in Finance:

1. \_\_\_\_\_ 2. \_\_\_\_\_

**Membership Dues (Check One):**

( ) \$300 Lifetime Member ( ) \$20 Non-voting Associate Member

*Optional information*  
Home Address: \_\_\_\_\_  
Street City State Zip  
Phone 2: ( ) \_\_\_\_\_ Phone 3: ( ) \_\_\_\_\_

Please send this form and a check (*payable to Kafa*) to: Dr. H. Young Baek (백형기)  
446 Conservation Drive  
Weston, FL 33327

For questions/comments, please contact Kafa Treasurer Dr. H. Young Baek (백형기)  
Mobile: 954-770-7222  
Email: hybaek@nova.edu