



AIHC

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Sponsorship Form

Name of Applicant

Your Name (Sponsor)

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I am a current member of AIHC

I am not a current member of AIHC

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City _____ State _____ Zip Code _____

How long have you known the applicant?

Have you had the opportunity to observe the applicants?

I fully recommend I recommend with reservations

Donation Amount

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Signature _____ Date _____