



Membership Application / Renewal

MEMBERSHIP LEVEL

- \$65 Regular Member
- \$115 Layette Member (*membership + donation of 1 layette*)
- \$200 Mary Virginia Merrick Member (*membership + donation of 2 layettes + donation for CCSA Programs*)
- \$50 Junior Member (*limited to age 35 and under*)

CONTACT INFORMATION

Name: _____

Address: _____ City: _____ Zip: _____

E-mail: _____

Preferred Phone: _____ Mobile Home Work

VOLUNTEER INFORMATION

Indicate where would you like to focus your volunteer time this year?

- | | |
|--|--|
| <input type="checkbox"/> After School Tutoring | <input type="checkbox"/> Layette Assembly or Delivery |
| <input type="checkbox"/> Book Collection, Labeling or Delivery | <input type="checkbox"/> Prayer Group |
| <input type="checkbox"/> Cristo Rey High School Lunchroom Duty | <input type="checkbox"/> Sewing or Knitting Circle |
| <input type="checkbox"/> Gardening at Elizabeth's Garden | <input type="checkbox"/> St. Peter Claver Reading, Library & Classroom Support |
| <input type="checkbox"/> Grady Rockers | |

Do we have your permission to use your name and/or photograph in articles, publications and social media?

- Yes
- No

Please specify experience you might have in the following areas. Your experience could be helpful to the Board.

- | | |
|---|--|
| <input type="checkbox"/> Accounting/Finance | <input type="checkbox"/> Meeting or Event Management |
| <input type="checkbox"/> Chairperson | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Graphic Design | |

OTHER INFORMATION

Birthday (mm/dd) _____

Church/Parish Affiliation: _____

Spouse/Partner Name: _____

If you are a new member, how did you find out about us?

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Member | <input type="checkbox"/> Internet Search |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Print |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Instagram | <input type="checkbox"/> Other |