



MEMBERSHIP & RENEWAL APPLICATION

January 1st – December 31st (20__)

DUES: \$75.00 – Individual Membership
 \$100.00 – Family Membership (Individual & Spouse)
 \$40.00 – Young Adult (Under 30 Years of Age)
 \$25.00 – Student Membership (Full-Time Student)

*Please make checks payable to: Pelican State Pachyderm Club
 Mailing Address: P.O. Box 113205, Metairie, LA 70011-3205*

First & Last Name: _____ Date: _____

Spouse First & Last Name: _____

Home Address: _____

City, State, Zip Code: _____

Mailing Address (if different): _____

City, State, Zip Code: _____

Contact Information:	<u>Applicant</u>	<u>Spouse</u>
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Primary Phone:		
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Secondary Phone:		
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E-mail Address:		
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Birthday:		
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Wedding Anniversary:		
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Sponsored by Member:		
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As a Member of the Pelican State Pachyderm Club, we encourage you to participate in club activities. Please indicate your interest in assisting with the following:

- Lead the Pledge of Allegiance to the Flag at a meeting
- Chair or Serve on a Committee: _____
- Offer the Invocation at a meeting
- Other (please specify): _____

Pelican State Pachyderm Club Meetings are scheduled for the 3rd Tuesday of each month, at 6:15pm, unless that date conflicts with a holiday. Please read meeting notices for changes of date, time, and location.

FOR PSPC USE ONLY: Amount: \$ _____ Cash Check # _____ Dated: _____

New Application Membership Renewal Date Received: _____ Recv'd by: _____