



**ALTRUSA INTERNATIONAL FOUNDATION OF GOLDEN VALLEY, INC.
MEMBERSHIP FORM**

This form may be printed and mailed in or completed and emailed to ko.altrusa@gmail.com.

Name _____

Home address _____

Home phone _____ Work _____ Cell _____

Would you prefer to be contacted at: Home Work Cell (please check one)

E-mail address _____

Birthday _____ (month/day)

Other club/organization affiliations:

Profession/Occupation/Interests:

_____ New Member (\$90.00)

Signature

Please mail this form with payment enclosed to:

Altrusa International of Golden Valley, Inc.
c/o Susana Schmidt
P.O. Box 6713
Santa Maria, CA 93456-6713

Sponsor Name: _____

Sponsor ID#: _____

Board Approved Date: _____

Amount Paid: _____ Check #: _____ Date: _____

ID#: _____