



**ARIZONA SWISS SOCIETY**

# 201\_ Membership Form

(covers period from January 1 thru December 31)

Last Name \_\_\_\_\_ First Name(s) \_\_\_\_\_ year of birth \_\_\_\_\_

Spouse: Last Names \_\_\_\_\_ First Name(s) \_\_\_\_\_ year of birth \_\_\_\_\_

Children's First Name(s) and year of birth \_\_\_\_\_

Dues: 65 and over ( per person)	\$ 10	\$ _____
Students (full time, up to 25 yrs old)	\$ 10	\$ _____
Single Membership	\$ 20	\$ _____
Family Membership (parents & their children till the age of 21 years)	\$ 30	\$ _____
Corporate Membership (special form) (includes <b>one</b> Family Membership )	\$ 60	\$ _____
Lifetime Membership	\$ 350	\$ _____
Donation		\$ _____
TOTAL		\$ _____

Please indicate:

\_\_\_\_\_ Membership Renewal (If no changes, no need to complete lines 1-5 below)

\_\_\_\_\_ New Membership Application

Contact information:

1. Address: \_\_\_\_\_

2. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

3. Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

4. E-mail Address: \_\_\_\_\_

5. Swiss Citizens: Indicate Canton of origin (1) \_\_\_\_\_ (2) \_\_\_\_\_

6. Signature : \_\_\_\_\_ Date: \_\_\_\_\_

-----  
**Please make checks payable to: ARIZONA SWISS SOCIETY  
and mail to: Mrs Helene Block, 23142 W Antelope Trail, Buckeye, AZ 85326**