

Point Loma Assembly
EST 1911



MEMBERSHIP APPLICATION

PLEASE FILL OUT THIS FORM COMPLETELY AND INCLUDE PAYMENT WHEN SUBMITTING. MAIL TO POINT LOMA ASSEMBLY, P O BOX 60174, SAN DIEGO, CA 92166

**Renewal _____ New member _____

***If you are renewing and your information remains the same as is printed in the current directory, please indicate that here and simply fill in your name below.*

NAME (print clearly) _____

ADDRESS _____

E-MAIL _____

PRIMARY TELEPHONE _____ ALTERNATE _____

DOB: (MM/DD) (_____/_____) _____

Would you like to be included in the Assembly directory? YES NO (circle one)

DUES:

_____ \$100 annually (July 1, 2018 – June 30, 2019)

_____ \$50 (Rate for members joining after February 1, 2018)

CASH _____

CHECK # _____

Would you like to help with?

___ SOCIAL FUNCTIONS AND SPECIAL EVENTS

___ MEMBERSHIP

___ DONATIONS/FUND RAISING

___ PRESERVATION/MAINTENANCE

___ PUBLICITY

___ HOUSE RENTAL/ADMIN

___ PROGRAMS

___ REFRESHMENTS

___ MEETING SET UP

___ OTHER _____

Received _____