



# MEMBERSHIP FORM

NAME(S) \_\_\_\_\_

EMAIL(S) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

DATE(S) OF BIRTH \_\_\_\_\_

PHONE \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

## ENROLLMENT TYPE:

- \$30 Individual       \$50 Couple / Family       \$20 Full-time student  
 \$100 Donor (Individual/Family)       \$250 Patron (Individual/Family)

## VOLUNTEER INTERESTS

- ACTIVISM  
 HOSTING A POTLUCK  
 SCHOLARSHIP APPLICATION REVIEW  
 SCHOLARSHIP GALA PREPARATIONS  
 SOCIAL EVENTS PLANNING  
 VOLUNTEERING

ANY OTHER NOTES FOR THE BOARD? \_\_\_\_\_

\_\_\_\_\_

MAIL A CHECK PAYABLE TO OPALGA+ TO:

**OPALGA+**  
**P.O. Box 1460**  
**Oak Park, IL 60304**