HEPHZIBAH CHICAGO AUXILIARY BOARD Membership Form 2017-2018

| \$50 Active Membership - The by-laws require active members to (1) attend at least 5 meetings throughout the year and (2) serve as a member or chairperson of a committee or board at large position and (3) support all major fundraisers. | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| · | - The by-laws state that a sustaining member is a is unable to participate in activities and services, but tibah Children's Association. |
| I choose to pay my dues:Online | CheckCash |
| Name: | |
| Committee / Event Interest (mark all events / con | mmittees for which you would like to know more): |
| Children's Interaction (year-round) Swanksgiving (fall) Publicity (year-round) I'm flexible! Gala Committee | Care and Spare Service Projects (year-round) Corporate Sponsorship (year-round) Other |
| Address: | |
| Phone: | Cell Phone |
| E-mail: | Birthday (mm/dd/yyyy): |
| Occupation (Current or Previous): | |
| Company Name: | |
| Does your company have an employee-matching | program? yesno |
| Address: | |
| Work Number: | |
| Spouse's Name: | Spouse Employer: |
| r | Matching gift program? yesno |
| Children (Names and Ages): | |
| Hobbies/Interests/Special Skills: | |
| Why do you want to volunteer for Hephzibah? | |
| Other Volunteer Activities: | |
| How did you hear about us? | |
| I will allow Hephzibah Children's Association to ur | ndertake a background check if neededYesNo |
| | Hephzibah, we ask for your support in fundraising by that may be potential sponsors, grantors or funders: |
| | |

Please submit this form to your Membership Chair when complete.