

METROPOLITAN HOUSTON CHAPTER-CRA

Name (First) _____ (Last) _____

Complete 3 + 1&2 as Needed **Dues \$10/year/ New Member - Current Year Free**

Dues Payment _____ **Scholarship Fund Donation** _____

TOTAL _____ ☐ Cash ☐ Check, Payable to **MHC** Check# _____

☐ - **New Member Data** ☐ - **Current Member Data Update**
☐ - **New Survivor Data** (PLEASE, Enter UPDATED data only)

Member Birthday mm/dd (Month) _____ (Day) _____

Spouse/Partner Name (First) _____ (Last) _____

Spouse/Partner Birthday mm/dd (Month) _____ (Day) _____

Wedding Month _____ Wedding Year _____

Address _____

City _____ State _____ ZIP _____

Member Retirement Month _____ Retirement Year _____

Preferred Telephone (One Number Only) _____

Email Address (One Address Only) _____

This data may be shown in the printed Directory ☐ **Yes** ☐ **No.**

I wish to receive my MHC Newsletter by ☐ **Email** ☐ **Postal Mail.**

**The MHC Event most convenient for me to attend is noted below.
Please include me in your attendance estimates.**

West Area	Harris County Smokehouse 222 W. Grand Parkway S Katy, TX 77494	Q1 – Tuesday, January 17 Q2 – Tuesday, April 4 Q3 – TBA
North Area	Cilantros Mexican Grill 314 Sawdust Road, Suite 118 Spring, TX 77380	Q1 – Tuesday, January 31 Q2 – Tuesday, April 18 Q3 – TBA
Southwest Area	Spring Creek Barbeque 4895 State Highway 6 Missouri City, TX 77459	Q1 – Wednesday, February 15 Q2 – Tuesday, May 2 Q3 – TBA
Central Area	Blue Onyx Bistro 4720 Richmond Ave Houston, TX 77027	Q1 – Wednesday, March 1 Q2 – Wednesday, May 17 Q3 – TBA

I am unable to attend any of these events

Please email your completed form to membership@cra-metrohouston.org or,
by postal mail to: **Membership Data Coordinator**

**11152 Westheimer # 729
Houston, TX 77042**