



SLOVENIAN CATHOLIC CENTER ~ PO Box 634 ~ Lemont, IL 60439

Membership

Thank you for supporting our Slovenian Catholic Center! We very much appreciate your contributions in prior years, and hope you will renew your membership. Please return the completed form and payment. If you are not a member but would like to keep receiving our newsletter, please return the form confirming your contact information.

Membership Year: _____

Name: _____

Spouse's Name: _____

Dependent Children: _____

Address: _____

Phone: _____

Email: _____

Membership Type:

Individual Membership - \$50

Senior Membership - \$35

Family Membership - \$100

Total donation: \$ _____

Method of payment:

Cash

Check #: _____

Credit Card #: _____ Exp. Date: _____

3-digit verification code: _____ Billing zip code: _____

Signature: _____

I would like to receive a membership card Yes No

** Membership cards will be distributed at the Member Appreciation Dinner. If you are unable to attend, it will be mailed to you **

I would like to receive the quarterly newsletter Mail Email

Thank you for your continued support!