

Booker T. Washington High School Alumni Association of Dallas, Inc.



A 501(c)(3) Nonprofit Organization

MEMBERSHIP APPLICATION FORM

(Please complete all fields)

** MEMBERSHIP TERM: 1 YEAR (JUNE 1 - MAY 31)**

NAME					
Firs	st	Maiden	Last		
SPOUSE'S	NAME				
ADDRESS				APT.#	
CITY			STATE	ZIP	
PHONE NO	PHONE NO SPOUSE'S PHONE NO				
CLASS YR		SPOUSE'S CLASS YR.	(Only if spouse	graduated from BTWHS)	
EMAIL AI	DDR	SCYZ			
SPOUSE'S	EMAIL AD	DR.	1111		
BIRTHDAY SPOUSE'S BIRTHDAY					
Indicate F	Payme <mark>nt Op</mark> t	tions:	Ind	icate Payment Method:	
ANNUAL MEMBERSHIP DUES: \$30.00/yr # of years				CHECK MONEY ORDER	
AMOUNT FOR MEMBER & SPOUSE: \$50.00/yr # of years CASH (Spouse must be a former BTW Dallas student)					
\$100 - A	NNU <mark>AL ME</mark> MB	ERSHIP DONATION TO THE RE	UBEN SWEENEY, JR. MEM	ORIAL SCHOLARSHIP FUND	
TOTAL AM	OUNT PAID:				
<u>PAYMENT '</u>		A (BOOKER T. WASHINGTON I ASSOCIATION OF DALLAS,			
MAIIL TO:	ASSOCIAT P. O. BOX	H SCHOOL ALUMNI TION OF DALLAS, INC. 226901 FX 75222-6901			

BTWAA Website: www.bookertwashingtondallasinc.org