PACT/atlanta
www.PACTatlanta.org
Visit Our Web Page!

PACT ATLANTA MEMBERSHIP APPLICATION...

To join PACT Atlanta or renew your membership, complete the application below and return to *PACT Atlanta, PO Box 14858, Atlanta GA 30324* or give to a Steering Committee member at any event. Our membership year runs from July 1 to June 30. Membership for the year is $20 for a member, $30 for a couple.

Name:
_____

Address:
_____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell Phone #: _____

Email Address: _____

Birth date: (Month/Day): _____

Email address needed if you want to receive our monthly newsletter (.pdf file. Requires Adobe Acrobat Reader, which is available free online.)

Partner's Name:
_____

Cell Phone #: _____ Birth date: (Month/Day): _____

In future PACT-Atlanta publications, please indicate how you would like to have your name listed:

☐ Complete Name (First & Last Name)

☐ First Name and First Initial of Last Name

Total Amount Enclosed: $ _____Check No. _____Current Date_____

(PACT Atlanta does not distribute its mailing list to anyone outside its membership, but cannot guarantee that the mailing list will not find its way into the hands of commercial businesses that will use it for commercial purposes. PACT Atlanta works diligently to maintain and respect the confidentiality of its members and its mailing list, but at the same time can assume no responsibility for its use outside of the organization.)

Please indicate your area of interest or expertise:

Web Design __

Activities/Social Committee __

Fundraising __

Grant Writing __

Pride Committee __

Hosting a Potluck __

Please indicate how you would like to assist the chapter:

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