Bellas Gate Past Students & Church Association, Inc.

1941 W. Howard Street Chicago, Illinois 60626 (847) 328-2246 Membership Application Form

Date:			
Name:First		Last	
Present Address: Street			
City	State	, Zip Code	-
	Work Phone:	Cell Phone:	
	n this Organization? What can yo	u contribute to the Organization if y	/ou
•	iences, or anything else you wou	ld want us to know	
Do you have friends who	o would like to join this Organiza	ation? YesNo	
If yes, Please list his/her	name and contact information:_		
Annual Membership Du	e: \$60.00.		
Payment Method: Visa, Mastercard, Check			
Checks along with your	r application should be made o	ut to:	

Bellas Gate Past Students & Church Association, Inc., and mailed to: 1941 W. Howard Street, Chicago, Illinois 60626