

NEW MEMBERSHIP APPLICATION

Please fill in and print this or print it and fill in legibly
If you need Acrobat Reader, get it here: <https://get.adobe.com/reader/>

Ms Mrs. Mr. Dr.

NAME _____ AKA _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ FAX _____

EMAIL _____

CELL _____ SPOUSE'S NAME _____

_____ Yes, I want to join Brandeis National Committee.

Check one category:

_____ Regular \$ 60.00

_____ Couples \$100.00

Annual National dues apply from July 1 - June 30.

Make checks payable to **Brandeis National Committee [BNC]**

REMEMBER: Dues are TAX DEDUCTIBLE

Or Charge my BNC membership dues of \$ _____ to

___ Visa ___ MasterCard ___ AmEx

Account number _____

Security No: _____ Expiration date: _____

Signature: _____ Sign after printing

For mailing information, contact:

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Encino, CA 91436
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naomijavitz@brandeissfv.org

THANK YOU

for becoming a member of the Brandeis National Committee (BNC)
and for your contributions

Brandeis National Committee - San Fernando Valley Chapter