



St. Basil Greek Orthodox Church

2017 PHILOPTOCHOS MEMBERSHIP APPLICATION

* Qualifications: Greek Orthodox women

Member Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Cell Phone: () _____

E-mail: _____

Interest Inventory

I am interested in learning more about the following activities:

- | | |
|--|--|
| <input type="checkbox"/> Volunteer Work
<input type="checkbox"/> Homeless
<input type="checkbox"/> Project Mexico
<input type="checkbox"/> Volunteer Work with My Children
<input type="checkbox"/> Holy Week Activities | <input type="checkbox"/> Greek Festival
<input type="checkbox"/> Christmas Card
<input type="checkbox"/> Coffee Hour
<input type="checkbox"/> Palm Sunday |
|--|--|

Membership Dues

- St. Basil Philoptochos Membership (*Chose One*) \$45 \$75 \$125 other \$ _____
- Metropolis Required Dues @ \$15 \$ 15
- National Required Dues @ \$15 \$ 15
- TOTAL** \$ _____

Payment Information

CHECK: Made Payable to: St. Basil Philoptochos

CREDIT CARD: (For exact amount listed in "Total" above only)
CREDIT CARD TYPE: _____ CREDIT CARD # _____ CARD CV2 #: _____

EXPIRATION DATE _____ / _____ BILLING ADDRESS (*if different from above*): _____

NAME (*as it appears on card*): _____

SIGNATURE

DATE

Send Completed Application and Payment to:

St. Basil Greek Orthodox Church, 27129 Calle Arroyo # 1803, San Juan Capistrano, CA 92675

Questions? E-mail Membership Chair, Chrissie Zeppos at geranioszeppos@aol.com