



St. Basil Greek Orthodox Church

2017 PHILOPTOCHOS GIRLS/BOYS SERVICE GROUP (OFFICIAL NAME TBD)

** Any Girl under the Age of 18 who is committed to philanthropic work and leadership development*

Member Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

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

E-mail Address: _____

Time Donations

I am interested in learning more about the following activities:

- Volunteer Work
- Homeless
- Project Mexico

- Leadership Opportunities
- Career Mentoring Opportunities
- College and Career Success

Membership Dues

St. Basil Philoptochos (*Chose One*) \$10 \$20 \$30 Other \$ _____

TOTAL \$ _____

Payment Information

CASH

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