

## Scottsdale Chapter Membership Form

Date: \_\_\_\_\_

Title: (circle) Mr. Mrs. Ms. Miss (other)\_\_\_\_\_ Status: New Renewal Transfer

Type of Membership: Individual \$25.00 per year Family - \$35.00 per year

Name(s)\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

E-mail \_\_\_\_\_ Birthdate(s) \_\_\_/\_\_\_/\_\_\_ , \_\_\_/\_\_\_/\_\_\_

Would you like to be listed in PTPI's online directory ? \_\_\_\_\_ (member access only)

Please indicate the kind of chapter activities that most interest you. Check as many as you like.

Social Events \_\_\_

Guest Speakers \_\_\_

Travel \_\_\_

Committee Participation \_\_\_

Hosting Visitors \_\_\_

Fund Raising \_\_\_

World Wide Conferences \_\_\_

Humanitarian Projects : local \_\_\_ worldwide \_\_\_

Chapter board seat \_\_\_

Marketing/Public Relations \_\_\_

*Please return this completed form and your check to:*

Mr. Ken McDonald

6017 E. Waltann Lane

Scottsdale, AZ 85254-6501 Attn: P.T.P.I. Memberships

**Please Make Check Payable to: PTPI-Scottsdale**