



HAITIAN CONGRESS TO FORTIFY HAITI

haitiancongress.org: haitiancongress@rocketmail.com

MEMBERSHIP APPLICATION

Name _____

Address: _____

City: _____ State _____ Zip Code: _____

Telephone: _____ Fax: _____

City of Origin _____ Length of time in U.S. _____

E-mail: _____ Web Site: _____

Talent/Skills/Resources _____

Please circle area(s) of interest:

Homeland: Community and Culture: Youth: Civic Engagement:

**MAKE CHECKS PAYABLE TO "HAITIAN CONGRESS TO FORTIFY HAITI:
(YEARLY MEMBERSHIP: PLEASE CIRCLE ONE)**

Students: \$25 General Membership: \$50 Business/Organizations: \$100

*NON-MEMBERSHIP/DONATION: please circle one.

\$10 \$20 \$30 \$40 \$50 \$75 \$100 Other \$ _____

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL _____

Please return this form with your payment (check, money order or cashier's check) to the address below. Thank You.

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