

MEMBERSHIP



To apply for membership please complete all questions.

Applicants Name

Date : - -

Class year :

Membership Type Individual \$15.00 Couple \$25.00 Green Membership \$250.00 Gold Lifetime Membership \$500.00

Maiden Name :

E-Mail :

Address (Residential or PO Box) :

City

State

Postcode

Phone Number

Personal Information:

Tell us anything you wish to share with your fellow Arabs. (Please Print)

Please mail member form and payment to:
Coachella Valley High School Alumni Association
P.O. Box 3021
Indio, CA 92202-3021

CVHSAA Board Member Only

1. Received by (Name and Title):

2. Date Received (Application and Payment):

3. Payment Method : Cash Check Money Order Square Payment