



Por La Gente Association
Application for Membership

Prefix First Name Last Name

Home Address

City State Zip Code Gender/Ethnicity

Home: () _____ Cell: () _____ Work: () _____

Email address: _____

Please check the membership status you are interested in:

____ Active Membership; members will pay dues and will be granted voting privileges at all Association meetings

____ Service Membership; members will consist of people who volunteer at Por La Gente activities throughout the year. These members will not pay dues or have no voting privileges. However, these persons are eligible to become voting members.

Have you ever participated/volunteered at any PLG event? ____ yes ____ no

If yes, list event(s) _____

How did you hear about Por La Gente?

Please tell us about yourself and why you would like to become a Por La Gente Member:

Signature

Date

Please mail application to:
Por La Gente Association
Attn: Membership Committee
P.O. Box 085454
Racine, WI 53408