

## MEMBER INFORMATION FORM

I, the Undersigned, hereby respectfully petition the President, Officers and Members of BZH New York, for membership in your Association. If accepted, I promise upon my word of honor to strictly abide by and uphold the Constitution, By-Laws, Rules and Regulation of BZH New York, and strive to further the welfare and best interests of the association with neither political nor sectarian motives in mind.

Full Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country : \_\_\_\_\_

Occupation: \_\_\_\_\_ Company: \_\_\_\_\_

Email: \_\_\_\_\_

MSN  Yahoo  Gtalk  Skype  Other  : \_\_\_\_\_

Phone : \_\_\_\_\_

Membership Category :

Student or under 18 year old (\$30)

Single (\$40)

Family Membership (\$60) - Number of family members : \_\_\_\_\_

Do you wish to join one of our committees? If yes, select one:

Economy and Business

Communication and Media

Culture Committee

Tourism and Leisure Committee

I certify that the above questions are all truthfully answered,

Date : \_\_\_\_\_ Applicant's signature : \_\_\_\_\_

Please mail this completed form to the address indicated above with a check to BZH New York. You can also pay directly online at the following address [www.bzh-ny.org/shopping.php](http://www.bzh-ny.org/shopping.php)