

Treasurer's Use

Amount: _____

Date Received: _____

Payment Type: _____

Membership Application 2018 - 2019

Membership Type: Renewal New

(Please print as you would like your name to appear in directory)

Your name: _____
Title: First Initial Last Nickname
(Mrs., Ms., Dr., etc.)

Spouse's name: _____
Title: First Initial Last Nickname
(Mr., Dr., etc.)

Address: _____
Number & Street City State Zip

E-mail Address: _____

Phone: _____ **OK to list phone in directory?** _____

Please list any degrees or special talents you have: _____

The High Point Guild has two Circles of Care. Circles of Care are areas where Guild members can become involved in the work of Family Service. Please indicate below your area(s) of interest:

Fundraising Events: Serve as chair of a fundraising event, as member of the event committee or assist with day of event needs. Events include the annual Holiday Soirée (the Guild's largest fundraising event) and the Super Hero Dash 5K Race in partnership with the Kappa Delta Sorority at High Point University.

Volunteer Activities: Serve as coordinator or a member of the committee to provide lunch twice a year for the Healthy Start parenting class. Decorate holiday ornaments with children at Carpenter House, help coordinate the annual Healthy Start Baby Shower, or serve as a volunteer during the National Family Week event at the Fairview Family Resource Center.

Please complete this form and submit it to:

**The Guild of Family Service of High Point
217 Pine Ridge Drive, High Point, NC 27262
Membership dues are \$50**

Do you have any suggestions concerning volunteer projects or fundraisers?
