2007-08

New York State FHA/FCCLA Alumni & Associates

Supporting the Success of Youth Leadership in New York State

Post Office Box 865, Canandaigua, NY 14424-0865

http://alumni.nysfccla.org alumni@nysfccla.org

NYS FHA/FCCLA Alumni & Associates Membership Form

NAME: _____

Mailing Address: _____

Telephone: _____ Fax: _____

E-mail: _____

Original FHA/FCCLA Chapter: _____ Current School District: _____

Check One: _____ Alumni Member (former FHA/HERO or FCCLA member)

_____ Associate Member (non-former member, supporter of FCCLA organization)

_____ State Officer Alumnus (past State Officer with continued membership in FCCLA)

_____ Enclosed please find my $5.00* annual membership dues (Make checks payable to NYS FCCLA)

_____ Enclosed please find my $20.00* four-year membership dues (Prepay for four years)

_____ Yes! I will also be affiliating with the National FCCLA Alumni & Associates (dues separate)

_____ I am also enclosing a $_____* contribution to NYS Family, Career & Community Leaders of America.

Please return completed form and associated fees to:

Peg Helt, NYS FCCLA Coordinator
506 Lakeview Drive
Endicott, New York 13760

Thank you for becoming a part of New York State FHA/FCCLA Alumni & Associates!! Your support, generosity and enthusiasm is greatly appreciated!

PLEASE COMPLETE THE FOLLOWING QUESTIONNAIRE AND UPDATE AS NEEDED:

During which years and in what capacity have you been involved in FHA/FCCLA?

What is your current field of work? Would you be interested in sharing your expertise with FCCLA students?

In what ways would you like to become involved in New York State FCCLA?

* Your membership dues and gifts are tax-deductible as a donation to a 501(c)(3) organization in accordance with IRS regulation.