



## SILICON VALLEY PHIS 2017/2018 MEMBERSHIP FORM

Name (First, Maiden/Middle, Last):

School:

Chapter:

Grad Year:

Current address:

City:

State:

ZIP Code:

Birthday:

Email:

### 1. SELECT A MEMBERSHIP OPTION

#### **Bordeaux Membership \$40.00**

I'm interested in being involved in alumnae activities, receiving newsletters & event invitations & staying connected! I would like to contribute to support the chapter for providing Colony Gifts, Senior Gifts, Founders Day and with continued leadership development at Alumnae Chapter College and Convention.

#### **New College Grad Membership \_ Free!**

I am a new grad and I'm interested in being involved in alumnae activities, receiving newsletters & event invitations & staying connected!

Mail this form and your payment to:

**Silicon Valley Phis C/O Karen Fitting  
4735 Westwood Ave., Fremont, CA 94536**