



Official Membership Application Form

Date: _____ **NEW** ___ **RENEWAL** ___ **Referred by:** _____

Name _____ Business Name and Title _____

Address _____ Address _____

City, State, Zip _____ City, State, Zip _____

Phone Number _____ Phone Number _____

Cell Phone _____ Business _____

Email/ Website _____

**To save on postage WE EMAIL YOU. Do you
Email prefer your email at HOME or BUSINESS?**

Please select the committee(s) that may be of interest to you:

(see back of sheet for descriptions on each committee)

- | | | |
|---|---|--|
| <input type="checkbox"/> Brindis | <input type="checkbox"/> Events | <input type="checkbox"/> Funds Development |
| <input type="checkbox"/> Health Advisory | <input type="checkbox"/> Marketing | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Public Relations | <input type="checkbox"/> Scholarship | <input type="checkbox"/> Speakers Bureau |
| <input type="checkbox"/> Volunteer | <input type="checkbox"/> Web & Newsletter | |

Hermanitas® (Youth Mentoring Program: Please choose one or both of the following.)

- Mentor Committee

Yes, I'm proud to join MANA de San Diego! Enclosed are my membership dues (Payable to "MANA de San Diego", mail to P.O. Box 81364, San Diego, CA 92138-1364) in the tax deductible amount of:

- \$125 Small Business/Corporate (Non-voting member: receives business card ad in newsletter.)
 \$75 Supporting Member & Non-Profits (Non-voting member)
 \$50 Regular membership (Voting member)
 \$30 Student/Seniors *55+ years of age -- ID Required* (Voting member)
 Additional Donation

(All levels of membership receive a bi-monthly newsletter, announcements and invitations to MANA events.)

**MANA de San Diego's ability to advocate our mission depends on your support.
For more information contact MANA at 619.225.9594.**

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