

Alliance Française de Grosse Pointe



Membership Application Form 2009-2010

Mailing Address (as you want it to appear in the directory)

Name: _____

Address: Street: _____

City: _____ State: ___ Zip Code: _____

First name(s) if different than above: _____

Home phone: _____

E-mail Address: _____

_____ New Member

_____ Renewal

Interests

How would you prefer to receive our monthly newsletter? _____ by e-mail _____ by mail
(preferred)

What activities would interest you the most with the Alliance Française?

_____ Cultural events _____ French conversation _____ Entertainment

_____ Lectures in English _____ French movies _____ Cooking

_____ Lectures in French _____ Outings _____ Other: _____

Would you like to help in any area or serve on a committee? _____

For any additional comments or questions, please use the back of this application.

Membership Categories

Please choose one:

_____ Family Lifetime Member	\$500.00
_____ Single Lifetime Member	\$300.00
_____ Patron	\$75.00 / year
_____ Family	\$50.00 / year
_____ Single	\$30.00 / year
_____ Student	\$5.00 / year

Please mail your completed application with a check payable to
Alliance Française de Grosse Pointe to the following address:

Alliance Française de Grosse Pointe
23009 Maxine Street
Saint Clair Shores, MI 48080