



Philadelphia Lambda Club of the Deaf

P.O. Box 1012
Philadelphia, PA 19105

Membership Form

PLCD invites you to be a member!

Philadelphia Lambda Club of the Deaf is a premier organization for the Deaf, Hard of Hearing, and Hearing GLBT people living in the Metropolitan Philadelphia area. Come and join us, and participate in various activities and opportunities, making friends, and grow. We at PLCD are looking forward to being of service to you and your community.

Please check only one!

- Full Member - \$10.00 annual dues
 Associate Member - \$8.00 annual dues
 Social Member - \$5.00 annual dues

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Email address: _____ Pager address: _____

I attest that the data given on this form is accurate. I authorize use of any information and pictures in news article and website about me. I declare that I am over 21 years old. I understand that I will be on 60 days of probation and passing vote of the membership. I will not hold responsibility of PLCD and will not cause any inappropriate conduct of any events.

Signature: _____ Date: _____

Please fill and send the membership form with a check or money order payable to: PLCD

PLCD
Attn: PLCD Treasurer
P.O. Box 1012
Philadelphia, PA 19105

For Office Only:

Date Received: ____/____/____ PLCD Staff: _____ Check or Cash: \$ _____ CK # _____
Date Paid: ____/____/____ Expired Date: ____/____/____ Access Date: ____/____/____
