



Membership Application

YES, I would like to **be a member of the H.A.C.A.** Enclosed is my \$60.00 yearly membership fee.

YES, want to **support H.A.C.A.** and here is my contribution of :

\$25.00

\$50.00

\$100.00

\$_____ other

MEMBER PERSONAL INFORMATION

Last Name: _____

First Name: _____

Street address / PO Box: _____

City: _____ State: _____ Zip Code: _____

Phone 1: _____ Home Mobile

Phone 2: _____ Home Mobile

Email: _____

PLEASE MAKE ALL CHECK PAYABLE TO H.A.C.A AND RETURN IT TO :

Membership
Haitian American Community Association
1637 West Morse Avenue
Chicago, IL. 60626

Helping Haitians and Haitian-American Make A Difference!

