



MABUHAY, INC.

(A Filipino-American Association)

Website: www.mabuhayinc-md.org

Email: mabuhayinc1985@gmail.com

Membership Application Form

Name: _____ Nick Name: _____ DOB: ___/___/___

Spouse Name: _____ Nick Name: _____ DOB: ___/___/___

Address: _____ City: _____ State: _____ Zip Code: _____

Tel. No. _____ Email Address: _____

For Family Membership, **please list all children under 18 years old** (use back of the form if necessary):

<u>Name</u>	<u>Date of Birth</u>	<u>E-mail Address</u>	<u>Sex</u>
_____	___/___/___	_____	M / F
_____	___/___/___	_____	M / F
_____	___/___/___	_____	M / F
_____	___/___/___	_____	M / F

Area of interests, talents, & hobbies: _____

Yes, I (we) hereby accept membership in MABUHAY, INC. (A Filipino-American Association).
Enclosed is a check payable to MABUHAY, INC., for my (our) membership fee as selected below:

Membership is a one time fee (life-time member).

Family = \$30.00

Senior Citizen, 62 yrs. old or over = \$15.00

Individual = \$15.00
(18 yrs old & over)

Student (Undergrad & Graduate) = \$15.00

Yes, I (we) give permission to MABUHAY, INC. to include above information in its membership roster only.

Signature of Applicant

Date

Sponsored by: _____

Contact: **MABUHAY, INC. - Membership Director**
c/o Millet Panga 15520 N. Nemo Ct, Bowie, MD 20716-1460
Phone: 301-275-1198 Email: rdvpanga@yahoo.com

Comments: _____