



# NATIONAL PHILOPTOCHOS SOCIETY

## 2019 Membership Remittance Form

For Submission to  
the National Office

Note: Philoptochos Membership Enrollment: January 1st through April 30th  
TYPE/FILL IN FORM THEN PRINT THIS PAGE (SEE BELOW FOR ADDITIONAL DIRECTIONS)

Date: \_\_\_\_\_ Chapter #: \_\_\_\_\_

Church Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

President's Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

President's Telephone: \_\_\_\_\_

President's E-mail: \_\_\_\_\_

Please Complete:  
Check #: \_\_\_\_\_ For: \$ \_\_\_\_\_ Number of Members: \_\_\_\_\_

### **Two Signatures Required On All Checks:**

- Make checks payable to: National Philoptochos
- \$15.00 per member as adopted at the 2010 Convention
- Include the name and address of your church and chapter number on the check
- Email a list of members (on Membership Excel Spreadsheet including all members' names, addresses, phone numbers and most importantly emails) who have paid their stewardship for the year.
- Please list at the end of the form the names of your associate members, including men (on Membership Excel Spreadsheet to including all members' names, addresses, phone numbers and emails) who have paid their stewardship for the year.

**NOTE:** To input members' names please click on: **2019 Chapter Membership List Form in Excel**

Then email to: [membership@philoptochos.org](mailto:membership@philoptochos.org)

Chapter President Signature: \_\_\_\_\_

### **Print, Sign & Mail this Cover Page with Payment to:**

**National Philoptochos  
126 East 37th Street  
New York, New York 10016**

For office use only:  
Date \_\_\_\_\_