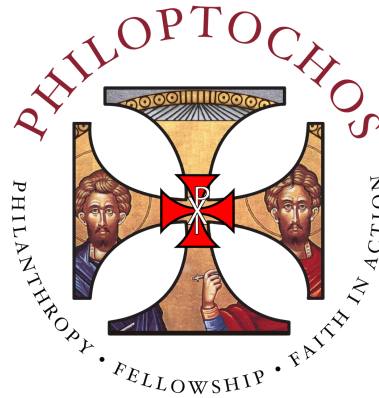


Philoptochos Membership



Your pledge amount should include \$__ for National and Metropolis obligations.

We greatly appreciate and additional donation as it will stay within our local funds.

Name: _____

Phone Number: _____

Email: _____

Pledge Amount: \$ _____

4 Digit Chapter Number: _____

Check #: _____