



ARIZONA SWISS SOCIETY

www.arizonaswissociety.com

2024 Membership Form

(covers period from January 1 thru December 31)

- New Membership Application
- Membership Renewal (**Even if no changes, please fully complete contact information below**)

Last Name _____ First Name(s) _____ year of birth _____

Spouse: Last Name _____ First Name(s) _____ year of birth _____

Children's First Name(s) and year of birth _____

- Senior, age 65 and older (**per person**) \$ 15 \$ _____
- Students (full time, until age 25) \$ 15 \$ _____
- Single Membership \$ 30 \$ _____
- Family Membership \$ 40 \$ _____
**2 spouses/partners & their children until the age of 21
- Corporate Membership \$ 60 \$ _____
additional form, includes **one Family Membership
- Lifetime Membership \$ 350 \$ _____
**2 spouses/partners & their children until the age of 21
- Hardcopy of membership directory (published each March) \$ 5 \$ _____
- Donation \$ _____

Payment type: TOTAL \$ _____

- Cash
- Check# _____
- PayPal: <https://bit.ly/48QAST3>
- Venmo: <https://venmo.com/u/azswissociety>

Contact information:

1. Address: _____
2. City: _____ State: _____ Zip Code: _____
3. Phone: _____ Alternate: _____
4. E-mail Address: _____
5. Swiss Citizens: Indicate Canton of origin (1) _____ (2) _____
6. Signature: _____ Date: _____

Please make checks payable to ARIZONA SWISS SOCIETY and mail to:
Sibylle Zaugg-Reuter, 14032 E Clinton St, Scottsdale AZ 85259

