



# ARIZONA SWISS SOCIETY

[www.arizonaswissociety.com](http://www.arizonaswissociety.com)

## 2025 Membership Form

(covers period from January 1 thru December 31)

<input type="checkbox"/> <b>RENEWAL</b> (please complete page 2)	<input type="checkbox"/> <b>NEW</b> (please complete page 2)
<input type="checkbox"/> <b>SENIOR</b> (age 65 and older)	<input type="checkbox"/> \$15 per person
<input type="checkbox"/> <b>STUDENT</b> (full time, until age 25)	<input type="checkbox"/> \$15 per person
<input type="checkbox"/> <b>INDIVIDUAL</b>	<input type="checkbox"/> \$30 per person
<input type="checkbox"/> <b>FAMILY</b> (2 adults & children up to age 21)	<input type="checkbox"/> \$40
<input type="checkbox"/> <b>CORPORATE</b> (includes one Family Membership), please complete only the Corporate membership form	<input type="checkbox"/> \$60
<input type="checkbox"/> <b>LIFETIME</b> (2 adults & children up to age 21)	<input type="checkbox"/> \$350
<input type="checkbox"/> <b>HARD COPY OF MEMBERSHIP DIRECTORY</b> (published each April)	<input type="checkbox"/> \$5
<input type="checkbox"/> <b>DONATION</b>	<input type="checkbox"/> \$
<p>Form of payment for your membership:</p> <p><input type="checkbox"/> Cash <input type="checkbox"/> Check # _____</p> <p><input type="checkbox"/> PayPal: <a href="https://bit.ly/48QAST3">https://bit.ly/48QAST3</a></p>	<b>TOTAL = \$</b>



PLEASE COMPLETE PAGE 2





## CONTACT INFORMATION:

Last Name:	
First Name:	Year of Birth:
Phone Number:	Email Address:

Last Name:	
First Name:	Year of Birth:
Phone Number:	Email Address:

Children's First Name (s):	Year(s) of Birth:
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Street Address:		
City:	State:	Zip Code:
Swiss Citizens Canton of Origin:		
Signature:		Date:

Please make checks payable to ARIZONA SWISS SOCIETY and mail to:

Sibylle Zaugg-Reuter, 14032 E Clinton St, Scottsdale AZ 85259

If paying electronically please email the completed form to:

[azswissociety.membership@gmail.com](mailto:azswissociety.membership@gmail.com) or mail it to the above address

