Hampshire County Smith Club 2019-2020 **Membership and Contributions**

(Please print clearly. Membership information is used for HCSC purposes only and is not shared.)

NAME		CLASS YEAR	ADA? Ye	es No
ADDRESS				
Street		City/Town		Zip
EMAIL ADDRESS		PHONE (_)	Home Cell
(Please indicate if NONE. I	Members without email will rec	eive paper communications.)		(circle one)
Membership Du	ies:			
	Premium Membership - \$5	0		
	(\$25 membership; \$25			
			0	
Contributions:				
commons.	Endowed Scholarshin Fund (ta	x deductible)		
	• •	uctible)		
		ductible)		
		ully funded at this time. Please cons		ner funds instead *
Total Enclosed: Mail to:	(Please make check payable to HCSC - Katherine Naughton	<i>HCSC</i>)		
	PO Box 893			
	Northampton, MA 01061-0893	3		
I am interested	in: (Please check all that a	pply)		
	Programs/Events:			
	Opportunities to socialize			
	☐ Activities inclusive of far			
		re suggest topics of interest)		
	☐ Events at Smith			
	☐ Presentations/learning or			
	☐ Other (please specify)			
	Volunteering:			
	☐ Helping at an event/activ	•		
	☐ Recruiting/welcoming pr			
		kill (please specify)		
	☐ Planning an event			
	☐ Other (please specify)			

Welcome and thank you for joining!