

Young Friends Membership Registration Form

This information is confidential and will only be used for internal International House purposes and to keep you informed about upcoming events and programs.
Member benefits extend for one full year from the month of enrollment.

Young Friends Membership: \$40 ____

Payment Method: Check ____ Cash ____ Credit ____ (VISA __ MasterCard __ American Express __)

Card Number _____ Expiration date _____

Name: _____ Date of Birth: _____

Home Address: _____
Street City State Zip Code

Home Phone: _____ Cell Phone: _____

Personal Email: _____

Occupation: _____

Place of Employment: _____

Work Address: _____
Street City State Zip Code

Work Phone: _____

Work Email: _____

How did you hear about us?

Website ____ Brochure ____ Event _____

Friend/Member Name _____ Other _____

Where should we mail IHP magazine, invitations, etc? home ____ work ____

Which email address do you prefer us to use? home ____ work ____

Please fill out this form and mail it with your check or credit card information to:

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