



**FILIPINO-AMERICAN COMMUNITY
OF SOUTH PUGET SOUND**
PO Box 3108, Lacey, WA 98509-3108
Telephone (360) 923-1943
Website Address: www.facsp.org



APPLICATION FOR MEMBERSHIP

(Please complete and mail this application with your membership fee)*

New Membership

Renewal of membership

Section 1: Member Information				
Last name		First name	Middle initial	Gender <input type="checkbox"/> M <input type="checkbox"/> F
Address				
City	State		ZIP Code	County of residence
Date of birth (mm/dd/yyyy)	Work phone number () -	Home phone number () -	Cell phone number () -	
Email Address		Special skills and hobbies		
Section 2: Spouse Information (if applicable)				
Spouse Last name		First name	Middle initial	Gender <input type="checkbox"/> M <input type="checkbox"/> F
Date of birth (mm/dd/yyyy)	Work phone number () -	Home phone number () -	Cell phone number () -	
Email Address		Special skills and hobbies		
Section 3: Family Information (if applicable)				
Names of Children		Year of Birth	School/Grade Level	

I understand that by signing this Application for Membership, I fully subscribe to the General Purposes of the Filipino-American Community of South Puget Sound (FACSPS) as follows:

- Promote programs to foster education and consciousness of Filipino heritage among its members, especially the youth.*
- Promote Filipino-American identity in the community.*
- Promote services and charitable contributions to local community and to international non-profit organizations.*

Signature: _____ Date: _____

***Membership Fees: \$20/year for Family or \$10/year for individual membership**