



Polonia Institute, Inc.

3400 W Adams Blvd, Los Angeles, CA 90018

Individual Membership Application

If completing by hand, PLEASE PRINT

MEMBERSHIP DESIRED:

<input type="checkbox"/>	Regular Member: any individual or organization that supports the mission of the Institute and pays annual dues of \$120, or as established by the Board of Directors.
<input type="checkbox"/>	Sustaining Member: a member who commits financial support of at least \$50 per month or \$600 per year.
<input type="checkbox"/>	Patron: a member who commits the substantial support of at least \$5,000 in a single donation, a legacy gift (endowment), or in the annual equivalent in hours spent working for the Institute.
<input type="checkbox"/>	Benefactor: a steady patron who commits on a monthly basis the substantial support for the Institute of at least \$2,500 per month or the equivalent in hours spent working for the Institute.

LAST NAME	FIRST NAME	MI	TITLE
			<input type="checkbox"/> DR <input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MS

ADDRESS

CITY	STATE	ZIP

RESIDENCE PHONE	BUSINESS PHONE	CELL PHONE

EMAIL 1	EMAIL 2

OCCUPATION

LANGUAGES SPOKEN		
ENGLISH	POLISH	OTHER:

CITIZENSHIP		
USA	POLAND	OTHER:

MEMBERSHIP OF THE ABOVE APPLICANT IS RECOMMENDED BY	
PRINT NAME	ADDRESS

I ACCEPT POLONIA INSTITUTE MISSION AND VISION STATEMENT		
APPLICATION	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DECLINED

SIGNATURE	TITLE	DATE