



Year: _____ Membership Form

- Individual Membership -- \$25.00
- Family Membership (families residing in the same domicile) -- \$40.00
- Senior or Student Membership -- \$15.00

Name _____ Age:18 or older (Yes/No) _____
Last First

Address _____
Street City ST Zip

Phone _____ Email _____

Additional Family Members

1. _____
Last First Email

Age Relationship to Primary Member

2. _____
Last First Email

Age Relationship to Primary Member

3. _____
Last First Email

Age Relationship to Primary Member

4. _____
Last First Email

Age Relationship to Primary Member

5. _____
Last First Email

Age Relationship to Primary Member

Payment Method

Cash Check

Amount paid _____

Please make all checks payable to:..... **Washington, DC Euskal Etxea**
Mail address:.....Attn: Argia Beristain Dougherty
3817 Watkins Mill Drive
Alexandria, VA 22304