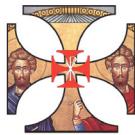


# PHILOPTOCHOS

GREEK ORTHODOX METROPOLIS OF SAN FRANCISCO



## 2019 Membership/Per Capita Remittance Form

*Philoptochos Membership Enrollment Due: March & by December 10<sup>th</sup>*

Date: \_\_\_\_\_ Chapter#: \_\_\_\_\_

Chapter Name: \_\_\_\_\_

Church's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

President's Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

E-mail: \_\_\_\_\_

Treasurer's Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Check #: \_\_\_\_\_ Amount: \$\_\_\_\_\_ for \_\_\_\_ Members @ \$15ea for the year of \_\_\_\_\_

### Please Remember That:

- **Two signatures** are required on all checks
- \$15.00 per member as adopted at the 2013 Fall Conference.
- Include the name and address of your Church and Chapter # on your check
- **Enclose a list of members (including their address, phone# and e-mail) who have paid their per capita dues for the year.**
- **In addition, please send an electronic copy of your membership list to [office@sfphiloptochos.org](mailto:office@sfphiloptochos.org) in the provided Excel spreadsheet ONLY.**
- Please indicate new members and associate members.
- Send **National Philoptochos** your Membership List including names, addresses, etc.(As of January 2011, National's per capita is \$15 per member)
- **Please do NOT staple or tape checks**
- **Send checks to:**

**Metropolis of San Francisco Philoptochos**  
**P.O. Box 230516**  
**Encinitas, CA 92023**

We appreciate and thank you for your cooperation in assisting us to keep our records current.  
If you have any questions, please call the Metropolis Office.