Hispanic League Membership Application



Members Credit Union Semi-Annual Membership \$10.00

Name :		N N N N	
Address:			
City:	State:		Zip:
Phone (Home): ()			
Email:			
Contact Name: (if Corporate M		2 % %	0
Your membership entitles you to: • Participation in voting for HL officers • Access to HL multicultural network		Access to Members Credit Union HL Membership Directory & Newsletter	
☐ Check if you do not want your n	ame published in the	Membership	Directory
Ple	ase check the areas i	n which you v	vish to volunteer:
Education ☐ Scholarship Committee ☐ Student Incentive Program ☐ Mentoring Program	Special Events ☐ Fiesta (September) ☐ Spanish Nite (March) ☐ Hispanic Heritage ☐ Month Events (October)		Administrative ☐ Financial Contribution ☐ Fund raising ☐ Scholarship Fund
Cultural Exchange & Awareness ☐ HL Representative at community events ☐ Hispanic Heritage Events ☐ HL Representative at Hispanic/Latino Forums		 □ Families in Need/Crises Assistance □ Dental Clinic Volunteer □ Community Care Center Volunteer 	
Signature		Date	