



# Membership Form PHI BETA KAPPA

NORTHERN CALIFORNIA ASSOCIATION

Please print clearly, especially your email!

Full Name Mr./Ms./Mrs./Miss/Dr. \_\_\_\_\_

Street \_\_\_\_\_ Home Phone \_\_\_\_\_

City/State/ZIP \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Does your employer match donations? \_\_\_ Yes \_\_\_ No

Year Initiated \_\_\_\_\_ School \_\_\_\_\_ Major/Degree \_\_\_\_\_

Name at Initiation (e.g., maiden name) \_\_\_\_\_

ΦBK ID number, if known \_\_\_\_\_

**Unless you specify otherwise, you will receive the newsletter by email weeks before others get the hard copy, thus saving paper, mailing costs, trees and landfills; and giving you advance notice of all our events.**

Sorry, I'm old-fashioned. I want to receive a hard copy.

### Your dues and donations are fully tax deductible

**ΦBKNCA is staffed entirely by volunteers; donations go directly to award programs**

- Patron \$1000+                       Donor \$100-\$249                       Full-Time Student \$10
- Sponsor \$500-\$999                       Sustaining \$50-\$99
- Benefactor \$250-\$499                       Regular Dues \$30

Any amount donated above the membership-dues amount may be designated:  
\$\_\_\_\_\_ to Scholarships \$\_\_\_\_\_ to Teaching Excellence \$\_\_\_\_\_ to Endowment

I am interested in the following committees:

- Programs     Scholarship                       Chapter Liaison                       Teaching Excellence                       Asilomar
- Finance/Audit                       Nominating                       Newsletter                       Membership (Database Mgmt)

Thank you for your support!

[www.pbknca.com](http://www.pbknca.com)

Membership

*Please make your check payable to PBKNCA and return this form with your check to:*

PBKNCA  
c/o Ms. Patricia Kenber VP membership  
1073 River Rock Lane  
Danville CA 94526-4001