## Pontian Greek Society of Chicago "Xeniteas" Membership Form 2025

First Name:		
Last Name:		
Spouse:		
Your Occupation:		
Address:		
City:	State:	Zip Code
Phone Number:		_
Cell:		<u> </u>
Email:		_
Please indicate how you would like to vo	olunteer:	
Future Dinner Dance Memorial Service May Lecture Academic Conference Youth/Dance Group Fundraising Activities Genocide Education Website Other – Explain:		
\$50.00/year Single Membersh \$80.00/year Couple Membersh	ip nip	

Please make checks payable to Pontian Greek Society of Chicago. You can pay your membership at a general assembly meeting or mail it to:

P.O. BOX 6127

Bloomingdale, IL 60108-6127

Thank you!