



SLOVAK AMERICAN SOCIETY
OF WASHINGTON D.C.

MEMBERSHIP APPLICATION / DONATION FORM

Memberships

Annual – Individual (\$25) \$ _____
Annual – Family (\$35) \$ _____
Lifetime – Individual (Under Age 65 - \$250) \$ _____
Lifetime – Individual (Over Age 65 - \$150) \$ _____
**Lifetime – Family (\$400) \$ _____

Tax-deductible donation (optional):

City University Scholarship Fund \$ _____
NSCML Endowment \$ _____
SASW General Fund \$ _____

Total amount enclosed: \$ _____

Name(s): _____

Address: _____

Telephone: _____

E-Mail: _____

Circle Your Selection:

Contact me to help out with SASW events: Yes No

Please mail this form and a check made payable to the “*Slovak American Society of Washington, DC*” to: **SASW Membership
P.O. Box 2502
Springfield, VA 22152-2502**

Annual memberships run through 12/31/2026.

* *Please note that the lifetime family membership only covers two persons aged 18 or older living in the same household at the same address.