

**THE WASHINGTON CHAPTER OF
UNION OF BLACK EPISCOPALIANS
2008 MEMBERSHIP APPLICATION**

NAME _____

ADDRESS _____

Street _____ Apt# _____

City _____ State _____ Zip Code _____

PHONE# _____ **FAX#** _____

E-MAIL ADDRESS _____

CHURCH AFFILIATION _____

WASHINGTON CHAPTER, UBE Membership <i>(Please check one)</i>	NATIONAL UBE Membership <i>(Please check one)</i>
<input type="checkbox"/> Church \$100.00 <input type="checkbox"/> Sponsor 50.00 <input type="checkbox"/> Family 35.00 <input type="checkbox"/> Individual 25.00 <input type="checkbox"/> Retired 20.00 <input type="checkbox"/> Youth (under 21) 15.00	<p style="text-align: center;"><i>Lifetime Membership</i></p> <input type="checkbox"/> Church \$1,000.00 <input type="checkbox"/> Individual 500.00* <p style="text-align: center;"><i>Regular</i></p> <input type="checkbox"/> Church \$100.00 <input type="checkbox"/> Organization 100.00 <input type="checkbox"/> Associate 40.00 <input type="checkbox"/> Family 60.00 <input type="checkbox"/> Individual 40.00 <input type="checkbox"/> Retired 35.00 <input type="checkbox"/> Youth (under 21) 25.00

**Life membership may be paid for in
5 yearly installments.*

WASHINGTON CHAPTER DUES \$ _____
NATIONAL U.B.E. DUES \$ _____
TOTAL DUES ENCLOSED \$ _____

Make checks payable to: Washington Chapter U.B.E.
Mail application and check to Margaret D. Lewis, Membership
 8008 16th St., NW
 Washington, DC 20012-1202