



**Return completed form via Company Mail to:  
 Telephone Pioneers of America  
 Alexander Graham Bell Chapter No. 15  
 2055 L Street, N.W. 4th Floor  
 Washington, D.C. 20036  
 Atten: Membership**

**VCSI  
 APPLICATION FOR MEMBERSHIP**

NAME: \_\_\_\_\_  
 (PRINTED) \_\_\_\_\_

\_\_\_\_\_ LAST NAME FIRST NAME MI  
 SIGNATURE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ TEL: \_\_\_\_\_

COMPANY: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_  
 STREET ROOM/FLOOR# CITY STATE ZIP

WORK TEL. #: \_\_\_\_\_ SOC. SEC. #: \_\_\_\_\_

BENEFIT DATE (NCS): \_\_\_\_\_  
 MONTH DAY YEAR

BIRTHDAY: \_\_\_\_\_  
 MONTH DAY

SPOUSE/SIGNIFICANT OTHER NAME (optional): \_\_\_\_\_

**DUES**

Annual dues of \$15.00 will be collected in \$1.25 increments by payroll deduction on the first pay period each month;  
 a one-time initiation fee of \$1.00 is also billed the first year.

***You can help!!!***

**ACTIVITIES**

You are invited to participate with any of the following activities. Please check those areas in which you are interested.  
***Thank you for "Answering the Call of Those in Need."***

- |                                     |                                      |                            |
|-------------------------------------|--------------------------------------|----------------------------|
| ◇ Beep Ball for visually challenged | ◇ Fundraising                        | ◇ Net Day (wiring schools) |
| ◇ Clowning                          | ◇ Homeless                           | ◇ Physically challenged    |
| ◇ Education/Literacy                | ◇ Hug-a-Bears                        | ◇ One Day special events   |
| ◇ Elderly                           | ◇ Instructor for Educational Classes | ◇ Officer or Chairperson   |
| ◇ Environmental                     | ◇ Mentally challenged                | ◇ Other _____              |

\_\_\_\_\_  
 Name of Person Signing New Member (if other than self) Telephone Number Date