



**ASSISTEENS® OF IRVINE
New Member Interest Form
2016-2017**

Name: _____ AGE: _____ Birth date: _____

Address: _____ Zip: _____ Home# _____

Email: _____ Cell # _____

Grade in Sept. 2016: _____ School: _____

Parent/Guardian #1 Name: _____

Parent/Guardian #1 e-mail: _____

Parent/Guardian #1 cell #: _____

Parent/Guardian #2 Name: _____

Parent/Guardian #2 email: _____

Parent/Guardian #2 cell #: _____

Siblings Names and Grades (2016): _____

Are you a member of Assistance League of Irvine®? Yes / No

SCHOOL ACTIVITIES (clubs, sports, student government, academia, music, drama, etc)

EXTRACURRICULAR ACTIVITIES (hobbies, interests, religious activities, talents)

Please mail completed form to: Jennifer Culbertson, 13 Woodhollow, Irvine, CA 92604 or via email to: jmc.3@cox.net. DO NOT SEND CHECKS! A New Member Meet & Greet will be held in the spring (*although new members in grades 7 - 9 may join anytime throughout the year*). You will be receiving an invitation to this informational meeting approximately 2 weeks prior. Questions may be directed to assisteenscoordinator2016@gmail.com

*ASSISTEENS are required to give 15 hours philanthropy plus 15 hours other per year. The total cost for NEW membership is \$150. Parents are requested to give 10 hours to ASSISTEENS, work 3 ALI Thrift Shop shifts per year & attend parent meetings.