**The Phyllis Chapter of the Phylaxis Society joining fee is - $40.00**

**Annual Dues is - $15.00 (Due each year before December 31st)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I,  *[Enter Name]* | |  | | | | | | | |
| Hereby apply for membership in the Phyllis Chapter of the Phylaxis Society. **Enclosed is $40.00 joining fee. \* FEMALES ONLY \*** | | | | | | | | | |
| I,  *[Enter Name]* | |  | | | | | | | |
| Hereby apply for subscription ONLY to the Phyllis Magazine.  **Enclosed is $15.00 for ONE YEAR. \* MALES ONLY\*** | | | | | | | | | |
|  | | | | | | | | | |
| In Support of this petition, I am giving the following information as requested. I understand that upon my acceptance, I shall receive a Membership Card. | | | | | | | | | |
| **Phone Number** | | |  | | | | | | |
| **Email Address** | | |  | | | | | | |
| **Mailing Address** | | |  | | | | | | |
| **City** |  | | | | **State** | |  | **ZIP** |  |
| State Phyllis Auxiliary (If none put (N/A) | | | | | | |  | | |
| **Only O.E.S. Members complete the section below:** | | | | | | | | | |
| **I am a member in good standing of** *[Enter Chapter Name]* | | | | | |  | | | |
| **O.E.S., P.H.A. Chapter No.** *[Enter Chapter No.]* | | | | | |  | | | |
| **Address Location** *[Location of Chapter***]** | | | | | |  | | | |
| **Grand Worthy Matron**  **Name:** | | | |  | | | | | |
| **Address:** | | | |  | | | | | |
| **Phone:** | | | |  | | | | | |

**Return Form and Fee to:  
Joanne Motley-Cain   
Email:**[**lrpalmerberry\_treasurer@ogcoespha.org**](mailto:lrpalmerberry_treasurer@ogcoespha.org?subject=Phyllis%20Chapter%20Membership%20Form) **19 Elmwood Lane  
Willingboro, NJ 08046**

**Make Checks Payable to: Oziel Grand Chapter, OES**