

Summer and Fall Program Registration:

Name: _____

Phone Number (in case we must contact you): _____

Program Number	Title	Fee	
Group Subtotal			Total Pd.

(Please make check payable to PALAC)

Option: I will be responsible for buying my own books (see discussion). Circle one YES NO

Do not mail this to PALAC. Instead mail to Sue Hogan

SUE HOGAN

2460 Orange Grove Blvd.
Pasadena, CA 91104-4937

2020 Half-Year Membership Dues for non-members

July 1 through December 31, 2020

PLEASE LEGIBLY PRINT ALL INFORMATION

Name: _____

Family Membership with: _____

Address: _____

City, State, Zip: _____

Phones: hm/wk/cell _____

E-mail address: _____

Individual Membership \$15, Family Membership \$25

Sustaining \$40; Supporting \$60; Patron \$125

Dues Subtotal

Other Contribution: \$ _____

(Thank you for your donation)