

West Point Parents Club of Greater Houston Membership Application Form

Parent's Last Name	
Parent's First Names	Father: _____ Mother: _____
Cadet's Last Name	Cadet's First Name: _____
Cadet's Class Year	Cadet's Date of Birth: _____
Cadet's Email	
Father's Email	
Mother's Email	
Street Address	
City, State, Zip code	
Home Telephone #	
Father's Cell #	
Mother's Cell#	
Parent Skills/Areas of Interest	

DUES: Annual dues are for the period from July 1st through June 30th. Dues are \$35/1 year, \$60/2 years, \$90/3 years, or \$120/4 years. Alumni & Associate dues are \$20/year.

1 Year
 2 years
 3 years
 4 years
 Alumni/Associate

WPPCGH NAMETAGS:

WPPCGH Nametags are \$15 each.

Name(s) for WPPCGH Nametags: #1

#2

Amount Paid: _____ Cash _____ Check _____ Check # _____

Periodically a contact list may be made and distributed to members of members who are attending an event such as TX Tamale Tailgate, Army-Navy Game, etc.

_____ Please initial here if you would like to OPT OUT of sharing your contact information (primarily cell and email) with members of WPPCGH.

Please submit this application form, along with your payment to the WPPCGH Treasurer at any meeting. You can also mail your form and payment to:

Mark and Lynn Font
 4811 Caladium Drive
 Sugarland, TX 77479