



Membership Form

- I would like to become a member of the Penn Highlands Huntingdon Auxiliary
- I would like to renew my membership
- I would like to be an active Auxiliary volunteer and have indicated my areas of interest below

Name

Address

City

State

Zip

Phone

E-mail Address

Membership Categories: *(please check one)*

- Annual Member.....\$10/year
- Life Member (one time payment).....\$100

Please make checks payable to Penn Highlands Huntingdon Auxiliary and send to: Penn Highlands Huntingdon Auxiliary, 1225 Warm Springs Avenue, Huntingdon, PA 16652

Volunteer Opportunities:

Please contact me regarding the following Auxiliary volunteer opportunities: *(check one or more)*

- Hospital Volunteer
- Children's Health Fair
- Gala Planning
- Other Event Planning
- Fundraising
- Health Promotion
- Publicity
- Scholarships

I have the following experience/skills that I would like to contribute:

