



# Pennsylvania East Hugh O'Brian Youth Leadership Active Alumni Membership Form

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First Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Last Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_

City/St/Zip: \_\_\_\_\_ High School: \_\_\_\_\_

HOBY Year: \_\_\_\_\_ College: \_\_\_\_\_

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(USE BACK IF NECESSARY)

1. How would you like to work with the alumni chapter?
  
  
  
  
  
  
  
  
  
  
2. What ideas do you have for service/social/fundraising activities?
  
  
  
  
  
  
  
  
  
  
3. What skills do you have that might help with the alumni chapter? For example, web page design, photography
  
  
  
  
  
  
  
  
  
  
4. What ideas do you have for new and different activities at the seminar?
  
  
  
  
  
  
  
  
  
  
5. What products would you like to see at the HOBY SpiritZone?

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Mail To:  
PA East HOBY Alumni Chapter  
c/o Justin Ledesma  
1137 Hollywood Ave.  
Havertown, PA 19083

OFFICE USE:
Amount Paid: _____
Date Received: _____