*Our Mission Statement: Promote and preserve the German language, culture, traditions and customs thru educational, social activities and events for the enrichment of our members and the community.*

**MEMBERSHIP APPLICATION**

Note: Applicants need not be of German descent

Please complete this form and return it with your check payable to GAST. Credit card payments are accepted by completing the application online by logging onto www.gastulsa.org and click on “Join our Membership” tab.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Individual Membership** | **Family Membership** | **Student Membership** |
| **(One person over 18 years of age)** | **(Two people over 18 years of age, at same household)** | **(Current Student ID required, under 25 Years of age)** |
| **Initiation Fee** | $25.00 | $25.00 | 4 hours as GAST volunteer |
| **Annual Dues** | $45.00 | $65.00 | $20.00 |
| **Total Amount** | **$70.00** | **$90.00** | **$20.00** |

The one-time initiation fee of $25.00 (or current student ID with volunteer hours completed) must be submitted with the first-year membership application, plus the dues according to the above schedule. Thereafter, annual dues are payable January 1st of each year.

We appreciate your interest in our organization. We look forward to meeting you and helping you get involved. GAST is a volunteer run organization, and many of our events count on a lot of volunteers -we’re so excited to have you join us! You will receive a welcome letter with more information about all the activities of GAST and the many volunteer opportunities. New members are invited to their first party/social at no charge.

Questions may be directed to the Willkommen Gruppe (Welcoming Committee). Please contact the GAST office at 918-744-6997 or email GastHouseOffice@gmail.com to be directed to one of our members.

(OVER PLEASE)

FIRST APPLICANT’S NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please Print)

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_ZIP\_\_\_\_\_ \_\_\_\_\_\_

PHONE (CELL)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE (HOME)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred contact method: \_\_\_Phone \_\_\_Text \_\_\_Email Preferred contact time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SKILLS / HOBBIES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

==================================================================================================

SECOND APPLICANT’S NAME (if applying for family membership) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE (CELL) E-MAIL

Preferred contact method: \_\_\_Phone \_\_\_Text \_\_\_Email Preferred contact time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SKILLS / HOBBIES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

==================================================================================================

MINOR CHILDREN: NAMES & AGES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURES**

I (We) agree to abide by the by-laws of the German-American Society of Tulsa (available from the office) and will be willing to offer my (our) time and ability to help achieve the goals of the organization.

First Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Second Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date