**Membership Application for 2019**

**Camp Eberhart Alumni Association, Inc.**

Name:

Maiden Name:

Address:

City, State, Zip:

Phone Number(s):

E-mail Address:

Years you were at camp:

Please check your choice:

[\_] Student Dues = $30.00 - Thank You!

[\_] Minimum Dues = $45.00 - Thank You!

[\_] Dues + Additional Contribution = $75.00 - Thank You!!

[\_] Generous Dues = $100.00 - Thank You!!!

[\_] **Other:** $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Thank You!!!!!!

**Send your contribution to:** Camp Eberhart Alumni Association, Inc.

316 South Eddy Street

South Bend, IN 46617

*Thank you for joining the Camp Eberhart Alumni Association in 2018!*

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