



**APPLICATION FOR ASTRA CLUB of \_\_\_\_\_  
MEMBERSHIP Year \_\_\_\_ - \_\_\_\_**

Name of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ OK to Text? YES NO

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code: \_\_\_\_\_

Email address: \_\_\_\_\_ Grade: \_\_\_\_\_

Birth Date: \_\_\_\_\_ First-time ASTRA member? YES NO

Name of Parent(s)/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent Address: \_\_\_\_\_

Parent email: \_\_\_\_\_

Other Clubs you are involved with: \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

Leadership positions you have held: \_\_\_\_\_

**T-Shirts:** Do you already have an ASTRA T-shirt? YES NO  
If no, what is your T-shirt Size (*adult sizes*): S M L XL 2XL

**Please check one committee you *might* be interested in:**

*(\*all ASTRA members participate in service and other club activities regardless of the committee they serve on)*

- MEMBERSHIP- *recruits members and plans fun membership activities*
- COMMUNITY SERVICE -*creates and conducts service projects*
- FUNDRAISING-*creates and organizes 1-2 fundraisers per year*
- PUBLICITY-*publicizing monthly meetings and activities*
- PROGRAMS -*contacts community speakers to talk at meetings*
- NOMINATIONS & ELECTIONS-*oversees club elections*

**Photo Release:** I hereby give Altrusa International, Inc. the absolute right and permission to use my images in its promotional materials and publicity efforts. I understand that the photograph(s) may be used in publication, print ad, electronic media or other forms of promotion. I acknowledge Altrusa’s right to crop or treat the photograph in its discretion. I waive any right to compensation arising from or related to the use of the photographs. I acknowledge that Altrusa owns the photograph.

**The signature of the individual(s) on this form indicates approval for the use of ASTRA related photographs as indicated above.**

I DO NOT give photo release permission

**Consent for Involvement of Minor:** I hereby give permission for my minor child to participate in the meetings and activities, including volunteer service, of this ASTRA Club.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Applicant’s Parent/Guardian (of minor): \_\_\_\_\_

\_\_\_\_\_  
ASTRA Membership Chair

Altrusan: \_\_\_\_\_

Date Recorded: \_\_\_\_\_ (revised Oct 2020)