

Heart of Hope Members Application Form

Membership Fee & Performance Fee:\$120 Year Check Title: HOH

Personal Information

Name: _____ Male ☐ Female ☐

Birth-date: _____ Age: _____
 Month / Day / Year

School _____ Grade _____

Address: _____

Telephone:(Home) _____ (Mobile) _____

E-Mail: _____

Parents Information

Father's Name: _____ Cell Phone: _____

Mother's Name: _____ Cell Phone: _____

E-Mail: _____

Members Interests

- | | | |
|-----------------------------------|-------------------------------------|---------------------------------------|
| ☐ Craft | ☐ Dancing | ☐ Golf |
| ☐ Cooking | ☐ Basketball | ☐ Music |
| ☐ Painting | ☐ Baseball | ☐ Badminton |
| ☐ Singing | ☐ Ping Pong | ☐ Jumping Rope |

Officer Use Only: