



2017- 2018 CAPA MEMBERSHIP FORM

Name: _____

Address: _____

City: _____ State _____ Zip _____

Home Phone _____ Office Phone _____

Cell Phone _____

E-mail Address: _____

Greek Affiliation: _____

School: _____

New Member? _____ Yes _____ No

Previous CAPA Member from Prior Year? _____ Yes _____ No

If you have questions about CAPA membership, please contact:

Patti Smith, CAPA Membership & Directory Chairman
olddogcop@msn.com
(972) 393-9171

Annual dues are \$20.00 and payable at the time you join CAPA. If paying by check please make payable to: **CAPA**

To join by mail, please send check and completed form to:

Barb Guzak, CAPA Treasurer
722 Penfolds Lane
Coppell, TX 75019

For CAPA use only:

Date Received: _____ Check # _____ Cash _____