



## The Kalo Foundation of Park Ridge Membership Application

To become a member of the Kalo Foundation please fill out and return this form with payment.

Name: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email (for Kalo use only): \_\_\_\_\_

Membership categories: Check one

Individual: \$15	Household: \$25
Corporate: \$100	Life Individual: \$150
Life Household: \$200	Senior (65+): \$10
Senior Household: \$20	Student: \$10

In addition to my membership I would like to contribute \$ \_\_\_\_\_

Benefits of membership: Early notification of all lectures & events; 10% discount on Kalo merchandise; Kalo Koupons.

Make check payable to Kalo Foundation and mail it and this completed membership form to:

Kalo Foundation  
P.O. Box 791  
Park Ridge, IL 60068

The Kalo Foundation of Park Ridge is a 501(c)(3) nonprofit organization under the regulations of the Internal Revenue Service. All contributions to the Foundation are tax-deductible to the extent provided by law.