



## ASTRA MEMBER INFORMATION

First Name: \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of School or College: \_\_\_\_\_

Current Grade: \_\_\_\_\_

ASTRA Club Name: \_\_\_\_\_

Year Joined: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Please return this for to:  
Altrusa International, Inc.  
332 South Michigan Avenue, Suite 1123  
Chicago, Illinois 60604-4305  
Telephone: 312-427-4410  
Fax: 312-427-8521  
E-mail: [adriana@altrusa.org](mailto:adriana@altrusa.org)