

OPEN EYES BEYOND BORDER

P.O. Box 1811
Pflugerville, TX. 78691
www.openeyesbb.org
Email: openeyesbb@gmail.com

DUES APPLICATION FORM

To join Open Eyes Beyond Border-OEBB, make your tax deductible contribution of \$40 (or \$10 for Students) by printing this form, filling it out, and mailing it with your check to the address above.

Date: _____ ENTER DUES AMOUNT TO BE PAID: \$ _____

ANY ADDITIONAL DONATION: \$ _____

CHECK TOTAL AMOUNT: \$ _____

NAME: _____
(how you want your name listed)

Title (e.g. Mr., Ms., Dr., etc) _____

License (e.g. OD, MD, PhD, LDO, etc.) _____

ADDRESS: _____

CITY _____, STATE _____ ZIP: _____

Please list one contact phone number:

Work, Home, Cell (circle which applies): (_____) _____ - _____

PLEASE provide us with your E-Mail Address:

(Very Important as this is how we communicate with you)

Make checks payable to *Open Eyes Beyond Border*
P.O. Box 1811
Pflugerville, TX. 78691

No cash accepted by mail!