

OCA - Pgh Membership Application Form

Name: _____ Chinese Name: _____

Spouse: _____ Chinese Name: _____

Children's Name, Age, and High School Graduating Class:

Mailing Address:

E-Mail Address: _____

(To be used only for OCA-Pgh communication)

Home Phone: _____ Work Phone: _____

Fax: _____

New Member: _____ Renewal: _____

Family Membership (\$35): _____ Single Membership (\$25): _____

Senior Membership (\$25): _____

Benefactor Membership (\$100): _____

Amount Enclosed: \$ _____ Date: _____

Please make check payable to OCA-Pgh and mail the check with the application to
Wen-Ching Yang, 3117 Treeline Drive, Murrysville, PA 15668