



**ST. ELIZABETH SETON MEN'S CLUB**  
9300 W. 167<sup>th</sup> Street, Orland Hills, Illinois 60487

**Membership Year 2026 / 2027**

LAST NAME \_\_\_\_\_ FIRST NAME: \_\_\_\_\_  
 \_\_\_\_\_ SPOUSE'S NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 HOME PHONE #: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

**Do you wish to receive a reminder for upcoming meeting?**

- YES (Please provide a valid email address)
- NO

**How would you like to be notified for wakes?**

- |  |                                |
|--|--------------------------------|
| <input type="checkbox"/> Email         | <b>Directory:</b> (Circle one) |
| <input type="checkbox"/> Call          |                                |
| <input type="checkbox"/> Cell          | Printed Version                |
| <input type="checkbox"/> Home          |                                |
| <input type="checkbox"/> Do NOT notify | Digital Version                |

Drop off completed form along with payment in parish office or mail to:

St. Elizabeth Seton Men's Club  
 ATTN: Membership Chairman  
 9300 W 167<sup>th</sup> Street  
 Orland Hills, IL 60478

*Do not write below this line*

**For Membership Chairman**

- Membership Renewal (\$40.00)
- New Membership (\$40.00)
- Second Half Membership (\$20.00)
- Golf League (\$100 fee includes membership)

Amount Paid: \$ \_\_\_\_\_ Date Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_

- Cash
- Check