



ST. ELIZABETH SETON MEN'S CLUB
9300 W. 167th 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 | Directory: (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 167th Street
 Orland Hills, IL 60478

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Do not write below this line

For Membership Chairman

- Membership Renewal (\$50.00)
- New Membership (\$50.00)
- Second Half Membership (\$25.00)
- Golf League (\$120 fee includes membership)

Amount Paid: \$ _____ Date Paid: ____/____/____

- Cash
- Check