Panama Canal Society, Inc.
7985 - 113th Street, Suite 334
Seminole, Florida 33772-4787

ANNUAL MEMBERSHIP APPLICATION

-PLEASE PRINT CLEARLY-

Questions? Call Toll Free 1-866-726-2262

Name:_____ _____ _____
Last Name and/or Maiden Name | First Name | M.I.

Mailing Address: _____ _____ _____ _____
Street and/or Box Number | City | State | Zip Code

Phone: (_____) _____ Email: _____

If you **DO NOT** want your contact information published for distribution to other PCS Members, check this ❑.
Did any of your contact information change from previous applications? ❑ Yes ❑ No
Would you consider becoming a PCS Volunteer ? ❑ Yes ❑ No

Spouse Name:_____ _____ _____
Last Name and/or Maiden Name | First Name | M.I.

Phone: (_____) _____ Email: _____

Would you consider becoming a PCS Volunteer ? ❑ Yes ❑ No

Eligibility for Membership: ONLY REQUIRED for ❑ 1st time Applicant OR ❑ Renewing Inactive Member.

MEMBER: (Select & complete all that apply.)

❑ Descendent of:
Full Name(s) _____

❑ Employee ❑ if retired, year retired _____
❑ CZ Government/PC Company/Commission
❑ US Military Service
❑ US Government Civilian
❑ Contractor supporting US Government Agencies
❑ Shipping Agent

❑ Dependent of:
Full Name(s) _____

❑ Attended and/or Graduated US Government School(s)
School: _____Class of _____

SPOUSE: (Select & complete all that apply.)

❑ Descendent of:
Full Name(s) _____

❑ Employee ❑ if retired, year retired _____
❑ CZ Government/PC Company/Commission
❑ US Military Service
❑ US Government Civilian
❑ Contractor supporting US Government Agencies
❑ Shipping Agent

❑ Dependent of:
Full Name(s) _____

❑ Attended and/or Graduated US Government School(s)
School: _____Class of _____

Please SELECT payment type for appropriate membership - Applicants must be 18 years old or older.

❑ $ 40 Renewal Membership for CURRENT Members when PAID BEFORE January 31st of current year.
❑ $ 50 Renewal for Inactive Membership includes $10 admin fee if NOT paid before January 31st of current year.
❑ $ 50 1st time Applicant includes $10 admin fee (Member and/or Spouse & children under18)
❑ $200 Governors Club Membership - 5 Year Membership includes special benefits and gift package from the Society

Total Amount $_____

Payment Type:

❑ Check #_____ [Make payable to Panama Canal Society, Inc - If check is NOT made on a US Bank, make payment by money order.]
❑ Money Order #_____ [Make payable to Panama Canal Society, Inc.]
❑ MasterCard/Visa Credit Card Only _____ Exp: ____ / _____ [For Member mail in ONLY.]

- Thank you for supporting the Panama Canal Society! -

❑ BHS ❑ CHS
Sponsored by: _____ Date: ____ / ____ /20 ____ _____ Class of ____