



Spring 2022 - Reservation Form

SAMPLE

IN WITNESS WHEREOF, the undersigned has executed this Joinder to Limited Liability Company Operating Agreement of North Philadelphia Scholarships, LLC as of the date set forth below next to the undersigned's signature.

IF AN INDIVIDUAL OR 2 INDIVIDUALS SIGNING JOINTLY:

IF A LEGAL ENTITY:

Angela McCole

Print name

Angela McCole

Signature of person's whose name is printed above

Spouse name (if applicable)

Print name

Spouse signature

Signature of person's whose name is printed above

Date: 1/24/2022

3217 W. Clearfield Street

Mailing Address

Philadelphia, PA 19132

City, State, Zip

amccole@stjamesphila.org

Email address

123-456-789

Social Security #

987-65-4321

Social Security #

Print name of legal entity

Signature

Print name and title of authorized individual signing for entity

Date:

Mailing Address

Email address

EIN

Where K-1 & other communication is mailed

AMOUNT OF INITIAL CAPITAL CONTRIBUTION (due upon acceptance): \$ 3,500

NOTE: Minimum of \$3,500 unless Manager determines otherwise

OPTIONAL: Manager is to use my Capital Contributions for children attending the following EITC/OSTC qualified schools:

Name of School: St. James School (Philadelphia)

Amount \$ 3,500

Name of School: _____

Amount \$ _____

IF THE ABOVE OPTIONAL DIRECTION IS LEFT BLANK, Capital Contributions will be regarded as undesignated by the Manager.

Randy Tarpey, in his capacity as Manager of the Company, hereby accepts this Joinder and admits the party or parties identified above as a Member of the Company as of the date set forth next to the signature below.

NORTH PHILADELPHIA SCHOLARSHIPS, LLC

DATE: _____

By: _____

Randy Tarpey, Manager

North Philadelphia Scholarships, LLC
Central Pennsylvania Scholarship Fund
Attn: Tami Clark or Randy Tarpey
227 Jefferson Avenue
Tyrone, PA 16686

PHONE #: 724-689-3473

Indicate best phone # to reach you