

A NON-PROFIT TAX-EXEMPT RELIGIOUS ORGANIZATION, ID #54-1139623

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## **MEMBERSHIP FORM**

NAME:(Last Name)				
ADDRESS:				
EMAIL ADDRESSES (IN	I CAPITAL LETTE	RS):		
PHONE NUMBERS: OFFICE: CELL:	HOME: ( HUSBAND: ( HUSBAND: (	) ) )	WIFE: _	( )
DEPENDENTS:				
NAME		RELATIONSHIP		DATE OF BIRTH (MM/DD/YYYY)
MEMBERSHIP / DONATION: PLEASE CHECK ONE LIFE MEMBERSHIP (\$151): ADDITIONAL DONATION ANNUAL MEMBERSHIP (\$51): PAID \$ BY CASH / CHECK #				
SIGNATURE:			DATE:	
			RECEIVED: \$	CASH / CHECK #
MEMBERSHIP CODE:			BY:	ON (MM/DD/YYY):