

# Membership Application



For Office Use Only

**Staff Initials** \_\_\_\_\_ **Application Received** \_\_\_\_\_

Staff, please make sure to attach receipt to the application.
 **Renewal Date** \_\_\_\_\_

Are you signing up for  Renewal or a  New Membership

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email Address** \_\_\_\_\_

## Options

Membership Plan	Rate	Total Amount
Individual	\$50 / Year	
Lifetime Memberships also available upon request.		
United Way Contribution	Amount	
<b>LIVE UNITED™</b> Designate the Washtenaw Alano Club to receive my United Way contribution (Code No. 2873)		
Direct Contribution	Amount	
Make a direct, tax deductible contribution to the Washtenaw Alano Club		
<b>Total Amount Collected</b>		

We accept cash or check. Please make checks payable to Washtenaw Alano Club.

Member Signature