



# MEMBERSHIP

application

### Select your membership:

- CMFDL Family – \$75
- Grandparent – \$50
- Renewal Membership: Member # \_\_\_\_\_
- ACM Family – \$110
- Individual – \$25
- Family Access – \$25  
*Include required documents with application.*
- Benefactor – \$250+

### Membership Information: *(first and last names required)*

Adult 1 \_\_\_\_\_ Adult 2 \_\_\_\_\_

Child 1 \_\_\_\_\_ DOB \_\_\_\_\_

Child 2 \_\_\_\_\_ DOB \_\_\_\_\_

Child 3 \_\_\_\_\_ DOB \_\_\_\_\_

Child 4 \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Membership Payment:

\$\_\_\_\_\_ Membership Price

\$\_\_\_\_\_ Optional Donation **Your support is appreciated!**  
*CMFDL is a 501(c)3 organization. Your donation amount is tax deductible.*

\$\_\_\_\_\_ TOTAL

Pay by:  Cash  Check *(payable to CMFDL)*

Charge:  Visa  MasterCard  Discover

Card # \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_ / \_\_\_\_ 3-Digit V-Code \_\_\_\_\_

Signature \_\_\_\_\_

**Return completed form & payment to: CMFDL at 51 Sheboygan St., Fond du Lac, WI 54935**

# CMFDL THANKS YOU!

FOR OFFICE USE ONLY: Membership Purchase Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_