



Friendship Force of Central North Carolina

www.ffcnc.org

Application & Membership Dues Statement

January 1 through December 31, 2010

Please check type of membership desired:

_____ Single \$25.00 or _____ Family \$30.00

Make checks payable to **FFCNC** and mail to:

FFCNC c/o Marvin Scherl; 6740 Germanton Rd., Germanton, NC 27019

Please print names of adult members included in membership:

First Member

Name: _____

Address: _____

City: _____

State & Zip: _____

Phone #'s: home: _____ work: _____ cell: _____

E-mail: _____

May we e-mail the newsletter to this address? (Y/N) _____

May we e-mail other correspondence (meeting reminders, minutes, etc.) to this address? (Y/N) _____

Second Member

Name: _____

Phone #'s: work: _____ cell: _____

E-mail: _____

May we e-mail the newsletter to this address? (Y/N) _____

May we e-mail other correspondence (meeting reminders, minutes, etc.) to this address? (Y/N) _____