

B.E.S.T. ANNUAL MEMBERSHIP APPLICATION 2007-2008

To become a Voting Member:

Submit a completed application

Dues: \$15/year for Individ.
\$30/year for Org.

CASH	
CHECK #	
Date Paid	
Membership Committee Use Only	

DATE: _____

NAME: _____

ORGANIZATION: _____
(If applicable)

TITLE: _____
(If applicable)

ADDRESS: _____

HOME #: _____

WORK #: _____
(If applicable)

OTHER #: (cell / fax) _____

(If applicable)

E-MAIL: _____

Please mark membership preference:

- Individual Membership
- Organization Membership

Receipt for Dues Paid	
Total Amount Paid:	
<input type="checkbox"/>	\$15
<input type="checkbox"/>	\$30
Type of Membership	
<input type="checkbox"/>	Individual Membership
<input type="checkbox"/>	Organization Membership
Paid by:	_____

Date Paid:	_____
Received by:	_____

PLEASE RETURN TO MEMBERSHIP COMMITTEE CHAIR:

Carol Shook shooker218@aol.com 847-546-5653