

FAN Membership Form

Thank you for joining the Family Action Network (FAN) of Winchester. Please write your information exactly as you'd like it to appear in the Membership Directory.

Today's Date: _____

Parent's/Guardian's Full Name:

Parent's/Guardian's Full Name:

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Child's(ren) Name(s) and Birth Date(s) month/day/year: _____

I would like to volunteer! I am interested in (please circle): Children's Events / Adult Events / Playgroups / Working Parent Opportunities / Newsletter / Publicity / Fundraising / Website / Other: _____

FAN activities run like the school calendar year from Sept 1-June 1. Our dues structure is consistent with this. Our membership renewal period takes place between June -August. If you join during the renewal period your membership dues will carry through to the next FAN cycle. Family Membership dues are determined by the month in which you join.

____ \$30 if joining between **June 1 – Jan 31** or \$40 for a Supporting Membership (Your additional \$10 contribution is tax deductible.)

____ \$15 if joining between **Feb 1 – May 31** or \$25 for a Supporting Membership (Your additional contribution is tax deductible.)

Please return this form with your dues payable to: **Family Action Network of Winchester**

Mail to: **FAN, P.O. Box 805, Winchester, MA 01890.**

You can also join online! Logon to: www.fanwinchester.org/membership.htm