Merrimack Friends & Families Membership Form

Member's Name:		Birthday:
Spouse/Partner's Name	(Optional):	
Street/Apt:		
City/ State/ Zip:		
Home Phone:	Cell phone:	
Email:		
Children's Names & Ages		DOB
	Membership dues are \$25	5:
Mail to: Merrimack Fri	iends & Families, PO Box 15	516, Merrimack NH 03054
	ŕ	nip and community page and
click the "po	ay online'' button (includes \$	\$1 processing fee)
New member R	Returning member: (Month)/	Year ioined
		J
New Member: Please let us k	know how you heard about th	e club:
O Newspaper O Cl	hamber O Web Site O B	rochure
O Other:	O Referred by:	
Returning Member: Are the	re changes to any information	n (Yes/No):
Which of the following into	ogtg ompost to year?	
Which of the following inter		Sagrat Sistars
Adult Socials Book Club	MFF Jr.	Stitch 'N Doo
Business Networking	MIFF JI. Mayia Ni aht	Stitch 'N Bee
Business Networking	Movie Night	Trips for Tots
Couples Night		
•	Playgroups/Playdates	
<u> </u>	Gardening	
I	Card/Game Night	
Ladies' Night Out	Recipe Swap	
Lunch Bunch	Scrap booking	Other:
Please Note: Merrimack Frien		
their families during club-sponso		
advertising purposes or on the N		
withdraw permission, please sub		orm is available on web site,
www.merrimackfriendsfam	illes.org. Thank you!	
	AAA OPP 1 III O I	
	*** Official Use Only *** Check# (or "cash")) Credit card
Date Amt Rcvd	Check# (or cash) Cicuit caru