

NORTH CAROLINA MOTHERS OF MULTIPLES Membership Application/Renewal Form

DATE _____

CLUB NAME _____

CLUB ADDRESS _____

NAME OF CONTACT PERSON _____

CONTACT ADDRESS _____

TELEPHONE DAYTIME _____ EVENING _____

EMAIL ADDRESS _____

OFFICE/POSITION CURRENTLY HELD _____

PAYMENT OF ANNUAL DUES

- ANNUAL STATE DUES are due to be paid by **August 31** for the current year.
- Annual dues are \$3.50 per member. The **JOINING FEE** for a **NEW CLUB** is \$10.00, and must accompany your local member dues.
- If your club is renewing its membership, and fails to do so by **October 1**, a \$25.00 REJOINING FEE will be added to your dues.

PLEASE CHECK ONE OF THE FOLLOWING:

1. Annual Renewal (on time) _____ no fee
2. First time application _____ \$10.00/club
3. Annual renewal (delinquent) _____ \$25.00/club

Local member dues:

The number of members currently registered in our local club is _____ X \$3.50 each.

TOTAL AMOUNT OF DUES _____

PLEASE WRITE CHECK FOR THE TOTAL AMOUNT DUE, AND MAKE CHECK PAYABLE TO:
NC MOTHERS OF MULTIPLES

Please mail checks, this document, and member listing (name, address, email, telephone #) to:

Martha Hamby
5005 Shoreline Drive
Greensboro, NC 27410
momhamby@triad.rr.com

NCMOM appreciates your club's efforts to pay dues on time.