Membership Form

Account No.:	Account No.:
Member's Name:	Contributor's Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Home Phone: Business:	This year's contribution: $ ☐ check enclosed
Email:	Please Charge To ☐ Visa ☐ Mastercard
Send Correspondence to: ☐ Member ☐ Contributor	Card No.:
Choice of Regional Chapter:	Expiration Date:
Note: A contribution ro the Mendota Gridiron Club by April 30 will earn credit in the Badger Fund Point System for the upcoming football season.	Card Owner:
	Signature: Date:

ACCORDING TO IRS GUIDELINES, your contribution is 100% tax deductible as a charitable gift

Membership is for a calendar year, January 1 through December 31. Please make checks payable to MENDOTA GRIDION CLUB—UWF