

# Sippewissett Association - Membership Form 2015-2016 v7

Name \_\_\_\_\_

New member \_\_\_\_\_ Renewing member \_\_\_\_\_

☐ **IMPORTANT:** For renewing members check here if there are no changes to your Contact Information since 2014 and leave that section blank.

## Contact Information:

Winter Address (+dates) \_\_\_\_\_

Winter Phone \_\_\_\_\_

Summer Address (+dates) \_\_\_\_\_

Summer Phone \_\_\_\_\_

**\*\*Where would you like your mid-June mailings delivered?\*\***

Winter address \_\_\_\_\_ Summer address \_\_\_\_\_

e-mail address : \_\_\_\_\_

*(We will contact you via e-mail for time sensitive issues only)*

## Additional Information:

I am making an additional contribution to support:

Water quality testing \_\_\_\_\_ Other \_\_\_\_\_

I would be interested in volunteering to help with:

\_\_\_\_\_ Board of Directors \_\_\_\_\_ Newsletters

\_\_\_\_\_ Membership recruitment \_\_\_\_\_ Mailings

\_\_\_\_\_ Socials \_\_\_\_\_ Other \_\_\_\_\_

## Payment Information:

Please enclose a check for \$30 plus any additional contribution made payable to Sippewissett Association. Send to: Sippewissett Association, P.O.Box 501, Falmouth, MA 02541. (Contributions are NOT tax deductible).

*OR you may pay online and complete an online Membership Form on the 'Become a Member' page at <http://www.sippewissett.org>*