## Sippewissett Association - Membership Form 2017-2018

Name		
New member Ren	newing member	
<b>IMPORTANT:</b> For renewing mo	embers check here	if there are no changes to your
<b>Contact Information and leave t</b>		Ç •
Contact Information:		
Winter Address		
Summer Address		
Winter Phone	Summer Pho	ne
E-mail address		
Please send my June mailin	gs to:	
Winter address		
Additional Information:		
I am making an additional of	contribution (\$	) to support:
Water quality testing		
I am interested in volunteer	ing to help with:	
	Newsletters	Mailings
Membership		Website
Water quality monit	oring	

## 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 <a href="http://www.sippewissett.org">http://www.sippewissett.org</a>