

Akron Chapter



Membership Application

Please make any corrections to your contact information below. If you also wish to become a member, please complete the membership section and return it with your payment. If you do not wish to become a member this year, please complete the non-membership section at the bottom.

Name

Occupation

Street or PO Box

Home Phone

City, State, Zip

Work Phone

Membership Categories

Local Membership (Includes chapter newsletter)

- Low Income \$10.00 \$ _____
- Individual \$25.00 \$ _____
- Household \$35.00 \$ _____
- Supporting \$50.00 \$ _____
- Patron \$100.00 \$ _____
- Other \$ _____

National Membership (optional) \$15.00 \$ _____

Other Contribution \$ _____

Gift Membership (Includes newsletter) \$10.00 \$ _____

Please list names and addresses on a separate sheet of paper.

TOTAL \$ _____

Email

I am willing to volunteer on the following committee:

- Program Library Hospitality
- Membership Speakers Bureau Sale of Items
- Publicity Greeters Special Interest
- Newsletter Public Relations

Non-membership Request

- I am unable to become a member at this time. Please continue to send me the newsletter.
- I no longer wish to receive the newsletter.

Make checks payable to: **AKRON PFLAG.**

Bring this form with payment to the next chapter meeting or mail to: PFLAG Membership, PO Box 5471, Akron, OH 44334. Membership and contributions to PFLAG are tax deductible. All information will remain confidential.

