

Membership Form

[] New Applicati [] Renewal	on			
Dues: [] \$15 Individua	[] \$30 Couple	[] \$8 Single add-on	[] Cash	[] Check
Contact Informa	ation: (Couples must ent	er the name and email fo	r each person)	
First Name:		Last Name:		
Email: (required	to receive communicatior	ns)		
Home Phone:		Cell Phone:		
2 nd Person:				
First Name:		Last Name:		
Email: (required	to receive communicatior	ns)		
Home Phone:		Cell Phone:		
, -		s corrections are needed)		
PO Box if used:	Town:		Zip:	
		e on committees or board new people. Are you inter		
[] Board position [] Committee:	Membership Social E	events Dine Outs Hos Raffle Publicity (Marke	spitality Activit ting)	ies Raffle

Make your check payable to Nauset Newcomers, Inc. and mail to:
Nauset Newcomers, PO Box 2515 Orleans, MA 02653-2515