

MEMBERSHIP FORM

Please use the Membership Form below to enroll in FFF or renew your existing membership in FFF for 2014. Indicate your choice of membership by placing your (X) below.

CHOICE OF MEMBERSHIP DONATION

- () Individual Membership Donation.....\$25.00
() Family Membership Donation.....\$35.00

Note: A Family Membership covers ALL Family Members residing at the same address.

() I want an Individual Membership. My check for: \$25.00 is enclosed.

() We want a Family Membership. Our check for: \$35.00 is enclosed.

I would also like to make an additional donation of \$ _____

TOTAL ENCLOSED: _____

Note: If you are sending both your membership dues and an additional donation, you may use one check to cover both of these items.

Please make all checks payable to Fairview Families and Friends, Inc.
Fairview Families and Friends is a Non-Profit Corporation.

PLEASE PRINT CLEARLY

NAME(S): 1) _____ (2) _____

3) _____ (4) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME #: _____ WORK #: _____

FAX #: _____ E MAIL: _____

Relationship to developmentally disabled person: _____

Disabled person resides at Home: ____ Fairview: ____ Private Facility: ____

Other State Facility: _____ Community Facility: _____

Other: _____

PLEASE CUT THIS PAGE ALONG THE INSIDE FOLD AND MAIL THIS ENTIRE PAGE TO:
Fairview Families and Friends, Inc., Fairview Developmental Center, 2501 Harbor Blvd.,
Costa Mesa, CA 92626

You can receive the FFF newsletter electronically!
Help us keep costs down and help the environment.

Yes, email the newsletter to: _____

All Dues and Donations to FFF are TAX DEDUCTIBLE. MANY THANKS!