



Become a Member Today!
Annual 2019 Membership Application

\$20 Individual or \$30 Family

Additional donation \$ _____

***Make checks payable to Dryden Community Center Café,
P.O. Box 801, Dryden, NY 13053***

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Would you like to Volunteer: _____

Member benefits include:

- **5% discount on all purchases (except gift certificates) when you show your membership card at the register**
- **Voting rights at each annual meeting**
- **Participation in special events**

INTERNAL USE ONLY

Date Received: _____

Payment Method & Amount: _____

Date Recorded: _____

Date Thank You Letter Sent: _____

Mailchimp updated _____

New or Renew