



Join the FIGHT FOR FREEDOM

DURING OUR MEMBERSHIP CAMPAIGN

Membership is the life-blood of the NAACP. We depend on our members' generosity to insure the NAACP's independence. We depend on you to keep the flames of freedom burning bright!

1 MEMBER INFORMATION *(please print clearly)*

Mr. Mrs. Ms. Miss Other _____ Date _____

 First Name _____ M.I. _____ Last Name _____

 Address _____ Apt./Suite _____

 City _____ State _____ Zip _____

 Unit Affiliation _____ Current Membership No. *(if renewal)* _____

 Phone No. _____ Email Address _____
 Are You A Registered Voter? Yes No _____
 Campaign _____ Solicitor's Name _____

2 MEMBERSHIP TYPE *(please check one)*

REGULAR ANNUAL MEMBERSHIP	LIFETIME MEMBERSHIP
<input type="checkbox"/> Regular Adult <i>(Ages 21 & older)</i>\$30* <input type="checkbox"/> Youth with Crisis Magazine <i>(Ages 20 & under)</i> ..\$15* <input type="checkbox"/> Youth without Crisis Magazine <i>(Ages 17 & under)</i> .10 <input type="checkbox"/> Annual Corporate\$5,000* <i>* Includes a 1-year subscription to The CRISIS Magazine</i> <i>** Fully-paid Life Memberships include a 10-year subscription to The CRISIS Magazine</i> <i>6.00 per year of the membership fee will be applied toward your subscription to THE CRISIS</i>	<input type="checkbox"/> Junior Life <i>(Payable in annual installments of \$25 or more)</i>\$100** <i>(Ages 13 & under) ____/____/____ Date of Birth</i> <input type="checkbox"/> Bronze Life <i>(Payable in annual installments of \$50 or more)</i> ...\$400** <i>(Ages 14-20) ____/____/____ Date of Birth</i> <input type="checkbox"/> Silver Life <i>(Payable in annual installments of \$75 or more)</i>\$750** <input type="checkbox"/> Gold Life <i>(Payable in installments of \$150 or more)</i>\$1,500** <i>Only available to Silver or Regular Life Members</i> <input type="checkbox"/> Diamond Life <i>(Payable in installments of \$250 or more)</i>\$2,500** <i>Only available to Gold or Golden Heritage Life Members</i>

3 PAYMENT

Amount Paid \$ _____ MasterCard VISA American Express Cash
 Credit Card Number _____ Check *(checks and money orders should be made payable to: NAACP)*
 Name as it Appears on Card _____ Expiration Date _____
 Authorized Signature _____

THANK YOU FOR YOUR SUPPORT

Please return to the Graves County / Mayfield NAACP Branch P.O. Box 177, Mayfield, KY 42066`

If you have question call Branch President, Bruce Dobyns @ 309.678.8990 or

Secretary, Virginia Langford @ 270.356.3614