



Membership Enrollment/Renewal Form

Yes, I want to become a member and support the work of The Arc of Dunn County!

CONTACT INFORMATION

First Name:

Last Name:

Company (if applicable):

Address:

City:

State:

Zip Code:

Email:

Phone:

Fax:

MEMBERSHIP TYPE

Please check the type of annual membership:

- Individual \$20
- Family \$30
- Corporate Bronze \$100
- Corporate Silver \$250
- Corporate Gold \$500

I am also interested in volunteering for The Arc of Dunn County.

MAIL THIS MEMBERSHIP FORM AND FEES TO:

The Arc of Dunn County
 Attn: Membership
 2602 Hils Ct.
 Menomonie, WI 54751

Make checks payable to The Arc of Dunn County

Signature _____

Date _____

