



# DENMARK FFA ALUMNI

*Helping to develop Today's Youth*

## MEMBERSHIP FORM

*Please print*

*Date:* \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Membership Options:    \_\_\_ Annual \$20                    \_\_\_ Life \$350

Make checks payable to **Denmark FFA Alumni.**

Return this completed form with payment to:

**Denmark FFA Alumni (Membership)  
P.O Box 23  
Denmark, WI 54208**

I would be interested in helping with the following Alumni events:

\_\_\_ Brown County Fair Food Booth

\_\_\_ Alumni Fruit Sale    \_\_\_ Wallender Shop Supply Sale

\_\_\_ Serving as an FFA Alumni Board Member

\_\_\_ Volunteering as a resource for a variety of ways needed to support FFA activities

<i>Office Use Only</i> Year Joined	<i>Office Use Only</i> Paid	<i>Office Use Only</i> Entered on Roster	<i>Office Use Only</i> Entered on Local Mailing	<i>Office Use Only</i> Entered on State Roster	<i>Office Use Only</i> Entered on National Roster
	Circle One: Cash \$ _____ Check Ck # _____	Date: _____  Initials:	Date: _____  Initials:	Date: _____  Initials:	Date: _____  Initials:

Alumni member who signed you up: \_\_\_\_\_