



NMCB-8 ASSOCIATION MEMBERSHIP FORM

(USE THIS FORM TO BECOME A PAID MEMBER OF THE ASSOCIATION)

Date: _____ Name: _____

I desire to become a **PAID MEMBER** of the **NMCB-8 Association**. My information is as follows:

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Email: _____ Dates Served: _____

Enclosed, please find my dues, in the following amount:

\$100.00 – This will make me a **Lifetime Member**, in good standing, of the **NMCB-8 Association**.

\$10.00 – This is **Annual Dues**, with are due **January 1st** of each year, in order to remain a member, in good standing, of the **NMCB-8 Association**.

Complete this form, as necessary, and return, along with dues, to:

Ken Bingham, Treasurer
1773 Tamarin Ave.
Ventura, CA 93003-6855

*Make your check, or money order, payable to the NMCB-8 Association.
PLEASE DO NOT SEND CASH*

(We are a non-profit, tax exempt organization. Your dues are TAX DEDUCTIBLE)