



LIVONIA NEIGHBORS and FRIENDS

MEMBERSHIP FORM

2007 - 2008
14115 Golfview
LIVONIA, MI 48154

DATE: _____ NEW MEMBER ☐ RETURNING MEMBER ☐
(Please complete Section B) (Please complete Section C)

NAME: (last) _____ (first) _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

TELEPHONE: (home) () _____ WORK/OTHER: () _____

EMAIL: _____ @ _____

BIRTHDAY: (month/day) _____

SECTION B

NEW MEMBERS - Please complete this section.

(Returning members only complete if you have corrections &/or additions.)

HUSBAND'S NAME: _____ HOBBIES & INTERESTS: _____

CHILDREN, under 18 (list by sex and month/year of birth) _____

How long have you lived in Livonia? _____ Moved from: _____

How did you find out about Livonia Neighbors & Friends? (check one or more)

☐ NEWSPAPER ☐ A FRIEND ☐ CLUB FLYER

☐ CHAMBER OF COMMERCE ☐ WEB SITE ☐ OTHER _____

SECTION C

RETURNING MEMBERS - Please complete this section.

How long have you been a Livonia Neighbors & Friends member? _____	Do you have special talents you might like to share with the club? _____ (Please list) _____
Have you ever held a Board Position? (Please list title and number of years that you held the position.) _____	Have you ever organized a special event or helped run an activity group? (Please list event/activity and number of years you held that position.) _____
What new things would you like to see added or brought back to the club? _____	Other comments: _____

CLUB USE ONLY

DUES PAID: \$20.00 DATE: _____ FY _____ HY _____
AMOUNT: \$ CK CASH COLOR CODE: _____