



## 2007-2008 Tucson Mothers of Multiples Membership Form

Annual Membership dues are \$35.00 and payable by August 15, 2007. **If paid before July 15<sup>th</sup>, 2007, dues are \$30.00.** Full membership includes free internet access to the monthly newsletter. Members may choose to receive the monthly newsletter by postal mail for an **additional \$10.00 subscription fee** per year.

\*Lifetime members have free local membership; to include State and National membership they must pay those yearly dues. Checks should be made payable to TMOMC. Please complete the following for the TMOMC Membership Directory and return it to our Membership Chairperson or mail to:

TMOMC  
PO Box 41364  
Tucson, AZ 85717-1364

Name: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

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

Home Phone Number: \_\_\_\_\_ Work/Cell Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Your Birth Date: \_\_\_\_\_ Your Anniversary Date: \_\_\_\_\_

I would like to receive the monthly newsletter by: (please check one)

- internet access (free)                       postal mail (\$10.00 yearly subscription fee)

<u>Children's Names</u>	<u>Birth Date (mm/dd/yy)</u>	<u>Sex (M/F)</u>	<u>Identical/Fraternal/Unknown/Singleton</u>
-------------------------	------------------------------	------------------	--

---



---



---



---



---



---

Statement of Liability Waiver: The member agrees to assume all the risk of bodily injury or harm to self and any family members which may occur as a result of participation in the club and releases and forever discharges any and all claims, and all rights to claims for damage against the Tucson Mothers of Multiples Club, it's president and board and any other officers, volunteers, co-sponsors or agents arising out of the members enrollment or participation in the club.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TMOMC encourages members' participation on various committees and/or appointed offices. Please check any and all areas you might be interested in helping coordinate:

- |   |  |   |  |                                     |                                      |
|---|--|---|--|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Picnics          | <input type="checkbox"/> Moms/Family Night Out | <input type="checkbox"/> Welcoming              | <input type="checkbox"/> Clothing Sale | <input type="checkbox"/> Bake Sales | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Secret Sisters   | <input type="checkbox"/> Historian             | <input type="checkbox"/> Newsletter             | <input type="checkbox"/> Website       | <input type="checkbox"/> Telephone  | <input type="checkbox"/> Play Dates  |
| <input type="checkbox"/> State Convention | <input type="checkbox"/> Delegate to National  | <input type="checkbox"/> National Rep./Research | <input type="checkbox"/> Other: _____  |                                     |                                      |