

NACYML 2009 MEMBERSHIP RENEWAL FORM

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ OFFICE PHONE _____

E-MAIL ADDRESS _____

TITLE _____

INSTITUTION _____

DIOCESE _____ REGION # _____

MEMBERSHIP NUMBER / USER ID _____

REGULAR ANNUAL DUES AMOUNT - \$ 60.00

DISCOUNTED ANNUAL DUES AMOUNT - \$ 30.00 (Please circle the appropriate organization below.)

Discounted dues are only available to members of our collaborating organizations at this time. Annual dues for active members of either La Red or the National African American Catholic Youth Ministry Network are \$30.00.

NECESSARY CORRECTIONS TO ABOVE INFORMATION

Return with payment by February 1, 2009 to:

NACYML Membership Renewal
NFCYM Offices / 415 Michigan Avenue, N.E., Suite 40
Washington, DC 20017-1518

Method of Payment

- Check/Money Order
- Discover
- Visa
- MasterCard

Credit Card Number

Exp. Date

CVVB/Security Code

Signature

Office Use Only

Check # _____

Date _____

Name / Organization on Check _____

Credit Card Process Date _____

Membership Expires: December 31, 2009