



Heart to Hearts Membership Dues Form

(Effective January 2016)

NAME: _____

ADDRESS: _____

PHONE (H): _____ MOBILE: _____

EMAIL: _____

BIRTHDAY Month _____ Day _____

MEMBERSHIP: We offer these levels of membership, each with its own membership benefits.

Regular	Individual	\$50	Discounts Full voting rights Member meetings
	Household (2 members, same address)	\$75	Discounts Full voting rights Member meetings
Senior	Age 65 and older	\$40	Discounts Full voting rights Member meetings
Student	Must present valid ID card	\$20	Exposure to field of health and wellness, community service opportunities
Corporate		\$250	Full voting rights Member meetings “Lunch and Learns”

I wish to make an additional tax deductible donation of: \$ _____

If you wish to be contacted about volunteer opportunities, check here [].

Please list any particular programs or areas of interest that you would like us to present.

MAKE CHECKS PAYABLE TO HEART TO HEARTS, INC.

Send payment and completed membership form to:

Heart to Hearts, Inc.

Attention: Membership

3131 Princeton Pike, Bldg. 2B, Suite 105

Lawrenceville, NJ 08648