

Alliance Française du Comté de DuPage **Membership Form**

Membership is renewed annually, each October. Renewals should be submitted beginning in August, but no later than October 31. Any new membership acquired after April 30th of a given year will be valid through October of the following year.

Please make checks payable to: **Alliance Française of DuPage County** c/o Diane Hoffmeyer, Treasurer P.O. Box 3992 Naperville, IL 60567-3992

For Administrative	r ^t
Purposes:	
Check #	
Date Processed:	

MEMBERSHIP TY	(PE
----------------------	-----

MEMBERSIIII 111			
□Individual - \$25	Retiree	, Individual - \$20	Student - \$10
	= p .:	G 1/P 1	4 1 1 'c' 1
Couple/Family - \$40		, Couple/Family -	Donation: \$
ADDITION INTE			Not Tax Deductible
APPLICATION INF	OKMATION		
Member(s) Name(s):			
Address:			
E-mail:			
CONTACT PREFER	RENCES		
Select as many as a			
•	•	y receive all memb	er and general announcements
☐ Mail	E-Mail	Telephor	ne
AF DuPage does not s	hare member co	ntact informatior	n with outside parties.
NEW MEMBERS			
How did you find out	about Alliance Fr	ancaise?	
ara jou mind out		~~~~~~~~ <u></u>	

By applying for membership and/or attending AF DuPage sponsored events, I consent to the use of my image in videos or photographs regardless of whether these materials are used for advertisement, publicity or other purpose on behalf of Alliance Française of DuPage.

As always, check the website for the current AFD program - www.afdupage.com. And please add any comments or questions on the reverse of this form. We are interested in what events and benefits you would like to see AFD offer or what you've thought of events we've had in the past. Please share your views as we strive to serve the membership to the highest degree possible. Merci!