

**THE FRIENDSHIP FORCE OF
RALEIGH 2020 MEMBERSHIP
APPLICATION**

<https://www.facebook.com/friendshipforceraleigh/>

Please circle one:

New

Renew

Today's

date: _____

A. INDIVIDUAL DATA

Last name _____ First name _____ M.I. _____

Address _____

City _____ Zip _____ Home phone (____) _____

Employer _____ Alt. phone (____) _____

Profession (or former prof.) _____ E-mail _____

B. SECOND ADULT - Family Membership

Last name _____ First name _____ M.I. _____

Employer _____ Alt. phone (____) _____

Profession (or former prof.) _____ E-mail _____

C. TALENTS OR INTERESTS YOU COULD SHARE WITH FRIENDSHIP FORCE

Foreign languages spoken _____

Countries visited or have knowledge _____

Talents and skills _____

Countries you would like to visit _____

D. MEMBERSHIP DUES FOR CALENDAR YEAR JAN. 1 TO DEC. 31

_____ \$50.00 Family membership renew /new (Two adults living in same household with or without minor children)

_____ \$30.00 Individual membership renew / new

_____ \$10.00 Student membership renew / new

_____ Total Please make check payable to The Friendship Force of Raleigh and mail to: The Friendship Force of Raleigh, P.O. Box 21022, Raleigh, NC 27619