



MBS Membership Renewal Form 2010-11

Please complete this form and return it to MBS with your payment. Membership cards will be mailed to you. Thank you!

Name _____

Address _____

City, State, Zip _____

Phone _____

*Email _____

(*The newsletter is distributed via email. If you prefer a copy be mailed to you, check here ____)

May we include your name on a membership list distributed to MBS members? Yes / No

******* ATTENTION: Meeting Schedule Revised *******

The members voted at the 2010 Annual Meeting (May 2010) to revise the meeting schedule. We will now meet in June, July, and August and skip the months of December and January. We will continue to meet on the 4th Monday of the month. Now you get **10** meetings for the same membership rate. Please visit the Web site for more information on upcoming meetings.

Type of membership (September 1 to August 31)

_____ Individual - \$25.00

_____ Family (includes partner and dependent children living at home) - \$35.00

_____ Business/Organization - \$35.00

MAKE CHECKS PAYABLE TO: Madison Bead Society

Bring your payment to the next MBS meeting or mail to:

**Madison Bead Society
PO Box 1563
Madison, WI 53701-1563**

Membership questions? Call Pat Reichert (608-345-3166) or email info@madisonbeadsociety.org