

**NL EMMC AUXILIARY NEW MEMBERSHIP FORM**

We welcome you to join our prestigious, all-volunteer, non-profit service organization. The Auxiliary is involved in the charitable mission of taking on a specific urgent need at Northern Light EMMC, pledging monetary support for that need, and working on events, projects and fundraisers that will meet that need. Each person brings a unique and different set of talents and skills to this organization which collectively assists in fulfilling the goals.

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE (H)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(C)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(W)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Dues:

* \_\_\_ **Member** – (Jan 1- Dec.31) $25 annually, includes two Auxiliary newsletters, two Lunch and Learns annually with lunch included, weekly NL EMMC Currents newsletters, first to receive announcements for Auxiliary and Medical Center events, and the satisfaction that comes with supporting a worthy cause. Please *indicate your “Areas of Interest” below.*

**NOTE:**

**Lifetime Memberships continue to be recognized and include all the benefits listed above.**

\_\_\_I am a Lifetime Member

* \_\_\_ **Supporter**– (Jan 1- Dec. 31) (No dues) Includes electronic Auxiliary newsletters, and invitations to attend Lunch and Learns for a nominal fee, as well as other Auxiliary and Medical Center events.
* \_\_\_ **Donation Only** I would like to support the Auxiliary with my gift of $\_\_\_\_\_\_\_\_\_

**Areas of Interest**

\_\_\_Winter Beach Ball Committee \_\_\_ Event worker/helper

\_\_\_ Kitchen Tour Committee \_\_\_ Seek sponsorships and donations

\_\_\_ Kitchen Tour Hostess \_\_\_ Social events throughout the year

\_\_\_Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Unable to participate at this time

**Please return this form along with your check payable to NL EMMC Auxiliary and mail to:**

**NL EMMC Auxiliary c/o Volunteer Services**

**489 State Street**

**Bangor, ME 04401**