

RSCDS and MSCD 2017 Membership Form

Please submit membership form and dues *by October 31st, 2016*.
All checks should be made payable to MSCD.

Name: _____

Under 25 years of age \$25.00

Age 25 or older \$40.00

Couple rate when both partners register \$35.00

Please complete if you are new or if your contact information has changed. Please leave blank if nothing has changed.

Street: _____

City, State, Zip: _____

Home Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

E-mail address: _____@_____

Please return this form with your payment to MSCD Membership Secretary:

Gill Robertson, 6714 Token Way, DeForest, WI 53532

Questions? Contact Gill, foodword@charter.net or 608 843-3134

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