



2008-09 MEMBERSHIP APPLICATION FORM
(Membership runs from September 1 through August 31)

Name

Additional Name

Address _____ City _____

ZIP _____ Home phone (_____) _____

Other phone (_____) _____

Occupation _____

Email: _____

Email: _____

Are you willing to volunteer time to DAFT? _____

Enter number of _____ INDIVIDUAL memberships @ \$50 _____

_____ I would like to make an additional contribution of \$ _____

Total _____

Make check payable to DAFT and mail to: DAFT
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