

UPPER NEW YORK

2017 MEMBERSHIP FORM



Enter my annual membership in the following category:
(80% of each membership is forwarded to
Washington, DC office / 20% will remain in Upper New York)

___\$500+ Stellar ___\$200 Spirited ___\$150 Supporting

___\$100 sustaining ___\$60 Subscribing ___\$12 Youth Member

___\$ ___ Other ___ I also wish to contribute an additional gift
toward the work of Upper New York in the
amount of \$ _____.

Chapter Use
Check # _____
Date Rec'd _____
Trans. To WDC _____

Total amount enclosed: \$ _____

New Member _____ Renewal _____

Name(s) _____

Address _____

E-mail(s) _____

To the best of your ability, please rank these issues in order of importance to you:

___ Environmental Concerns

___ Immigration Reform

___ Inclusiveness of LGBT people

___ Israel/Palestine

___ Poverty

___ Issues of Race and Privilege

___ Other _____

This will help us disseminate information and keep our goals focused.

It will not preclude you from working on other issues.

Have you been a member of another regional MFSA in the past? Y / N Which group? _____

Please tell us what congregation you are a part of: _____

Please send form and check to:

**Upper New York MFSA
c/o Pamela Burns
33 Sheridan Street
Glens Falls, New York 12801**

Please uses the back of the form to offer suggestions or volunteer your services!