



Start Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

## Membership/Contribution Form

Name: \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### Membership/Contribution:

\$25 Individual x \_\_\_\_\_ = \$ \_\_\_\_\_

\$100 Corporate

\$ \_\_\_\_\_ Endowment Fund

\$ \_\_\_\_\_ Contribution to The Arc

\$ \_\_\_\_\_ Total Amount Enclosed

*Please make checks payable to The Arc of Calhoun County*

Checks can be mailed to: 506 Riverside Drive  
Battle Creek, MI 49015

### **For Office Use Only:**

Date Received: _____	<input type="checkbox"/> Individual Member:	<input type="checkbox"/> Corporate Member
Letter Dated: _____	<input type="checkbox"/> Supporter window sticker	<input type="checkbox"/> Supporter window sticker
Payment Method:	<input type="checkbox"/> Annual membership gift	<input type="checkbox"/> Annual membership gift
<input type="checkbox"/> Cash		<input type="checkbox"/> Framed membership certificate
<input type="checkbox"/> Check (Check # _____)	Delivery Method for Items:	<input type="checkbox"/> Mail
<input type="checkbox"/> Online		<input type="checkbox"/> In Person

The Arc of Calhoun County is a 501 (c) (3) Non-Profit Agency that serves people with intellectual and developmental disabilities. All contributions and memberships are tax deductible.