

Fayette County Human Service Council, Inc., P.O. Box 1112, Uniontown, PA 15401  
**2009 INDIVIDUAL/STUDENT/SR. CITIZEN MEMBERSHIP FORM**

Dear Member,

Another new year is upon us and we're requesting your membership dues so we can continue our work in 2009. Dues are our most important source of funds. Please complete the information below and return this with your membership payment at our next meeting or to the address above.

**PLEASE COMPLETE AND RETURN THIS FORM ONLY IF YOU ARE REQUESTING INDIVIDUAL MEMBERSHIP. IF YOUR AGENCY IS REQUESTING MEMBERSHIP DO NOT USE THIS FORM.**

|                                   |  |
|-----------------------------------|--|
| LAST NAME                         |  |
| FIRST NAME                        |  |
| SUFFIX (E.G. JR.)                 |  |
| AGENCY/ORGANIZATION/BUSINESS NAME |  |
| POSITION                          |  |
| ADDRESS                           |  |
| CITY                              |  |
| STATE                             |  |
| ZIP                               |  |
| DAYTIME PHONE                     |  |
| FAX NUMBER                        |  |
| EMAIL ADDRESS                     |  |
| COMMITTEE CHOICE                  |  |

**Please visit the HSC website [www.fayettehumanservicecouncil.org](http://www.fayettehumanservicecouncil.org) for committee descriptions**

### Supplemental Information

1.  Check if you might be interested in becoming a future Board of Directors member.
2.  Use email for all communication  Use regular mail for all communication
3.  Check if you want to be removed from our mailing list.

**Membership Levels** (choose one only)

Individual-\$25.00 (one identified voting member)  Student - \$10.00  Sr. Citizen (age 60 years or older not affiliated with any agency or business)

Amount enclosed \$ \_\_\_\_\_  Check # \_\_\_\_\_  Cash

*Please make checks payable to:*

**Fayette County Human Services Council, PO Box 1112, Uniontown, PA 15401**