



Year 2009 Membership Application Form

ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PRIMARY CONTACT: _____ TITLE: _____

TELEPHONE #: _____ FAX #: _____ EMAIL: _____

For corporate memberships only, you can add additional named memberships for \$10 each. These people may attend meetings and will have their own name badges.

NAME 1 _____	TITLE _____	EMAIL _____
NAME 2 _____	TITLE _____	EMAIL _____
NAME 3 _____	TITLE _____	EMAIL _____
NAME 4 _____	TITLE _____	EMAIL _____
NAME 5 _____	TITLE _____	EMAIL _____
NAME 6 _____	TITLE _____	EMAIL _____

MEMBERSHIP FEES

TYPE OF MEMBERSHIP	QUANTITY	COST	TOTAL
Corporate: (includes one named or one generic membership)		\$100	
Additional Named		\$10	
Additional Generic		\$10	
Individual		\$70	
Full-Time Student (minimum of 12 credit hours)		\$0	
Part-Time Student (6-11 credit hours)		\$5	
Total Amount Enclosed			

Make check payable to: Midrange Users of Mid-Michigan ■ c/o Ron Johnson ■ 10729 Wesch Road ■ Brooklyn, MI 49230
 Please remit payment by January 31, 2009 (Or by the first meeting of 2009)