



# MEMBERSHIP APPLICATION FORM

1. Fill this form out
2. Enclose a your check payable to COLORADO WELSH SOCIETY
3. Mail to: **Colorado Welsh Society**  
**P. O. Box 103192**  
**Denver, CO 80250**

Name(s): \_\_\_\_\_

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

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

Country: \_\_\_\_\_

## MEMBERSHIP LEVELS

Single	\$20	\$
Student	\$15	\$
Senior (65 yrs. & up)	\$15	\$
Family	\$30	\$
Newsletter Only	\$10	\$
I wish to add a donation in the amount of (tax deductible)		\$
Total:		\$

Please send Newsletter subscription(s) to (if other than self):

Name(s): \_\_\_\_\_

Name(s): \_\_\_\_\_

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

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

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

THE COLORADO WELSH SOCIETY IS A REGISTERED 501C(3) NON-PROFIT ORGANIZATION