



**Starting Our New Year!**

**All members will be required to fill out a new membership form.**

*This allows the Membership Committee to accurately keep records of members' emails, phone numbers and addresses.*

*Please fill out your membership for 2015-2016 **ASAP** with payment of 10.00*

*Thank you.*

**Bring to the meeting or send to:**

**HMC  
PO Box 672,  
Hadley, MA 01035**

**Please include a check for \$10.00 payable to Hadley Mothers' Club. This is the fee for annual dues**

REGISTRATION

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ (no year req'd)

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Anniversary: \_\_\_\_\_ Email: \_\_\_\_\_

<u>Children:</u>	<u>Age</u>	<u>Birthday</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____