



2007-08 MEMBERSHIP AND INVOLVEMENT OPPORTUNITIES

Please print clearly

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

Referring member (Board member, if possible) _____

Are you a returning member? Yes / No (circle one)

- Annual Member (\$50 individual, \$85 per married couple)**
- Lifetime Member (\$350 individual, \$500 per married couple)**
- Other Contribution Amount \$ _____**

Payment Type (please circle one): Cash / Check / Visa / MasterCard	Amount: \$ _____
Check #: _____ Check Date: _____	
Name on Card: _____ Credit Card Number: _____ Sec. Code: _____ Exp. Date: _____	
*** If the billing address on the card differs from the address provided above, please indicate the billing address on the back of this form.	

In addition to joining YTAC, I would like to volunteer for the following Committee(s):

- Charity Selection
- Development
- Membership
- Social

*For more information on YTAC check out our website at: WWW.YTAC.ORG
For Membership questions, please contact Beth Black at: member-austin@ytac.org*

Return this form with dues to: Young Texans Against Cancer * 603 W. 13th St., 1A PMB 138 * Austin, Texas 78701