

**McDowell Economic Development Association, Inc.
Membership Form**

MEMBERSHIP INFORMATION:
Please fill out the information section below.

Membership Name: _____

Address: _____

If a firm, Contact Person at your firm for MEDA:

Phone # _____

Fax # _____

E-mail address:

DESCRIPTION: Check one of the membership categories below.

____ Annual Affiliate Membership \$ 15.00

____ Annual Full-Member Membership \$ 100.00

____ Annual Executive-Membership \$ 150.00

Contributions are tax deductible under IRS guidelines for 501(c)(3) Non-profits

AMOUNT ENCLOSED \$ _____

Make all checks payable to MEDA, INC.

THANK YOU FOR YOUR SUPPORT!!