



# 2006 BUTTERFLY AUXILIARY MEMBERSHIP RENEWAL



Note: If your information is accurate in the current membership roster you need **ONLY** to enter your name below.

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ YEAR JOINED AUXILIARY \_\_\_\_\_

MAILING ADDRESS:  \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

DAY AND MONTH OF BIRTH: \_\_\_\_\_



*For Membership renewal information only:*

*Date billed: \_\_\_\_\_ Date Received: \_\_\_\_\_ Amount Recd: \_\_\_\_\_ Ck# \_\_\_\_\_*

*Badge reorder: \_\_\_\_\_ Initial order: \_\_\_\_\_ Amount Recd: \_\_\_\_\_ Ck# \_\_\_\_\_*