



## MEMBERSHIP APPLICATION

Membership Type:  
(Please check one)

- \$20 – Individual (1 year)
- \$30 – Family (1 year)
- \$20 – Trainer Individual (1 year)
- \$30 – Trainer Family (1 year)
- \$75 – Vendor (1 year)

### **Applicant Information:**

Name: \_\_\_\_\_

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

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

Primary Phone Number: \_\_\_\_\_

Secondary Phone Number: \_\_\_\_\_

Primary Email: \_\_\_\_\_

Secondary Email: \_\_\_\_\_

*\*\*Please check if any information has changed since previous year*

### **Family Information:**

Spouse: \_\_\_\_\_

Minor Children: \_\_\_\_\_

### **Vendor Information:**

Contact: \_\_\_\_\_

Membership year is January 1 – December 31 or any portion thereof. Membership dues are payable in advance and are non-refundable.

Membership includes lunch at the Annual MAPFHA Membership Meeting sponsored by MAPFHA and access to the following: [www.mapfha.org](http://www.mapfha.org), MAPFHA group on Facebook, and advertising opportunities via mapfha.org.

Enclose this completed application with your check made payable to MAPFHA and mail to:

**Chuck Hauser**  
**MAPFHA Membership**  
**1822 – 115<sup>th</sup> St. W., Unit #132**  
**Shakopee, MN 55379**

**\*\*Questions please call or email – 612-710-9470 or [Chuck.hauser@earthlink.net](mailto:Chuck.hauser@earthlink.net)**

*Please do not publish my personal information*