

F • W • F • T • Y
MEMBERSHIP FORM

Instructions: Please fill out all of the pertinent information below. If the addresses or phone numbers are the same as the previous set of information, please indicate with a ditto (“”) mark in the subsequent blanks. Mark all boxes that apply. *Mail your \$45 dues payable to FWFTY and this form to FWFTY, Beth-El Congregation, 4900 Briarhaven Road, Ft. Worth, TX 76109.*

The primary communication method for all FWFTY activities is email, however some information will be sent via the US Mail. FWFTY’s information is also posted on the web, <http://www.fwfty.org>.

FWFTYite’s (Child’s) Information (please print):

Child’s Name: _____
Child’s Address: _____
Child’s City: _____ State: _____ Zip Code: _____
Child’s Phone: (hm) _____ (cell) _____
Birth Date: _____ School: _____ Grade: _____
Email: _____

Father’s Information (please print):

Name: _____
Address: (same as child) _____
City: _____ State: _____ Zip Code: _____
Phone: (hm) _____
Father’s Phone: (wk) _____ (cell) _____
Email: _____

Mother’s Information (please print):

Name: _____
Address: (same as child) _____
City: _____ State: _____ Zip Code: _____
Phone: (hm) _____
Mother’s Phone: (wk) _____ (cell) _____
Email: _____

Parent/Guardian: I am aware that photographs of members of FWFTY may be taken at local, regional, and national events. As the legal parent/guardian of the named FWFTYite, I authorize these pictures to be placed on FWFTY’s web site at the discretion of the FWFTY advisor.

Parent/Guardian Signature: _____ Date: _____