Morrison Center Volunteers

Membership Renewal Form 2023-24

Membership Year: July 1st to June 30th

Name:				
Address:		· · · · · · · · · · · · · · · · · · ·		
City:		State:	Zip:	
Home: ()				
Cell: ()				
Work: ()				o be called at work)
E-Mail:				· · · · · · · · · · · · · · · · · · ·
Membership Level				
Member: \$15 ☐ Conf	tributor: \$25 🗌	Benefactor:	\$100 🗆	Emeritus: \$0 □
Membership Status				
Active:				
Emeritus: (Volunte	ered for 10+ yea	rs and no long	ger able to w	ork)
The Morrison Center Voluntee	ers is a 501(c)(3) – D	ues above \$15 a	re considered t	to be a donation.
Select the area(s) where	e you would like	to volunteer		
Ushers:	(Door ushers, tick	et scanners, guid	les)	
Gift Shop:				
Hearing Assistance: □				
Please make	checks payable	e to: Morrisor	n Center Vo	lunteers
1910 Univ	Mail to: Morrisoversity Drive MS1			1050
				Revised: 3/6/2023
	For Membershir	o Committee Use Onl	ly	
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