

ACTIVE MEMBERSHIP \$25 PER PERSON

--- ANNUAL---

Thank you for your contribution to help with the day-to-day operation of Merrehope.

		NAME		
		EMAIL		
	(SECOND NAME - \$25 minimum/person)			
EMAIL				
	ADDRESS			
PHONE				
	MAKE CHECK	CHECK or CASH PREFERRED S OUT TO: Meridian Restoration	ns Foundation	
TUDN		k FORM TO: PO Box 8262, Merid		2)
TUKN		utner King Jr. Dr., Meridian, MS : lowers & Gifts, 1525 23rd Ave., N	39301 (Hours: Tuesday-Saturday 10- eridian, MS	3)
Your Tax Deductible Donatio			Additional Donation (lotal:)
	MEMBERSH	P RENEWAL (Thank you for your	continued support)	
		- BELOW TO BE COMPLETED BY MERREHOPE		
	MEMBER #	MEMRER #	DATE	

MH240815