



**2009 Membership Renewal
INVOICE
TAX ID # 223224686**

Renewal only \$60.00 October 1, 2009- September 30, 2010

**Please use PayPal to complete your renewal
or
send your completed membership form with check payable to CWHCM to:
[CWHCM, P.O. Box 68, Hebron, CT 06248](#)**

The information you provide here will appear in the Directory. Please print clearly.

Name _____
Employer _____ Title _____
Address _____ Tel. No. (____) _____
City _____ State _____ Zip Code _____
Fax (____) _____ E-mail _____

Home Address (Required for Database):

Address _____ Tel. No. (____) _____
City _____ State _____ Zip Code _____
Fax (____) _____ E-mail _____

Most mailings will go to your designated e-mail address. *Be sure that your SPAM filter accepts cwhcm.org email.* Please indicate whether you prefer mailings to home or office.