



Join the FIGHT FOR FREEDOM DURING OUR MEMBERSHIP CAMPAIGN

Membership is the life-blood of the NAACP. We depend on our members' generosity to insure the NAACP's independence. We depend on you to keep the flames of freedom burning bright!

1 MEMBER INFORMATION (please print clearly)

Mr. Mrs. Ms. Miss Other _____ Date _____

 First Name _____ M.I. _____ Last Name _____

 Address _____ Apt./Suite _____

 City _____ State _____ Zip _____

 UNIT 3012 - DUPAGE COUNTY, ILLINOIS _____
 Unit Affiliation _____ Current Membership No. (if renewal) _____

 Phone No. _____ Email Address _____
 Are You A Registered Voter? Yes No _____
 Campaign _____ Solicitor's Name _____

2 MEMBERSHIP TYPE (please check one)

REGULAR ANNUAL MEMBERSHIP	LIFETIME MEMBERSHIP
<input type="checkbox"/> Regular Adult (Ages 21 & older)\$30* <input type="checkbox"/> Youth with Crisis Magazine (Ages 20 & under) ...\$15* <input type="checkbox"/> Youth without Crisis Magazine (Ages 17 & under) . \$10 <input type="checkbox"/> Annual Corporate\$5,000* * Includes a 1-year subscription to The CRISIS Magazine ** Fully-paid Life Memberships include a 10-year subscription to The CRISIS Magazine \$6.00 per year of the membership fee will be applied toward your subscription to THE CRISIS	<input type="checkbox"/> Junior Life (Payable in annual installments of \$25 or more)\$100** (Ages 13 & under) ____/____/____ Date of Birth <input type="checkbox"/> Bronze Life (Payable in annual installments of \$50 or more) ...\$400** (Ages 14-20) ____/____/____ Date of Birth <input type="checkbox"/> Silver Life (Payable in annual installments of \$75 or more)\$750** <input type="checkbox"/> Gold Life (Payable in installments of \$150 or more)\$1,500** Only available to Silver or Regular Life Members <input type="checkbox"/> Diamond Life (Payable in installments of \$250 or more)\$2,500** Only available to Gold or Golden Heritage Life Members

3 PAYMENT

Amount Paid \$ _____ MasterCard VISA American Express Cash
 Credit Card Number _____ Check (checks and money orders should be made payable to: NAACP)
 Name as it Appears on Card _____ Expiration Date _____
 Authorized Signature _____ **Or Pay by Credit Card Online at: www.NAACP.org**

THANK YOU FOR YOUR SUPPORT

Mail Payment to:
 DuPage County Branch NAACP
 Membership Committee
 PO Box 475
 Wheaton, IL 60189-0475