FAIRFIELD GLADE LADIES CLUB
MEMBERSHIP FORM **ANNUAL DUES: $50**

Circle one: **New Member** **Renewal** **Date:** _____

NAME _____

ADDRESS _____

PHONE (Cell) ( ) (Home) ( )

EMAIL _____ Check if no eMail _____

Check/Cash $ _____

Are you or your spouse a veteran of the U.S. Armed Forces? Yourself _____ Spouse _____

Provide to a FFG membership person or mail to:

Fairfield Glade Ladies Club
P.O. Box 2004
Fairfield Glade, TN 38558