



# BECOME A MEMBER

Please complete the application and mail it with your membership dues to:

Variety - The Children's Charity  
ATTN: MEMBERSHIP  
1520 Locust Street, 2nd Floor  
Philadelphia, PA 19102

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Bus. Address: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**Membership Categories (Please check one)**

\_\_\_ Gold Heart Member (age 41-65) \$75.00/year

\_\_\_ Seniors (Age 66+) \$25.00/year

\_\_\_ Family \$100.00/year

**I am willing to volunteer my time or service on a committee.** \_\_\_ Yes \_\_\_ No

**I give permission to print my name and address in Variety's Membership Directory.** \_\_\_ Yes \_\_\_ No

**Payment**

\_\_\_ My check for \$\_\_\_\_\_ is enclosed.

\_\_\_ Please charge my VISA / MASTERCARD / DISCOVER (circle one) \$\_\_\_\_\_.

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

*Thank you for your support!*