

Friendship Force of Greater Atlanta
P.O. Box 13151
Atlanta, Georgia 30324

FFGA MEMBERSHIP APPLICATION

Name(s) : _____

Date of Birth: _____ Date of Birth _____

Address: _____

Home Phone: _____ Cell Phone _____

E-mail address: _____

Occupation: _____

Languages spoken: _____

Special skills _____

Please mark areas in which you would be willing to serve as a member of FFGA

___ Social event planning ___ Membership Administration _____

___ Web site ___ Publicity ___ Photography ___ Newsletter

___ Board of Directors ___ Journey Coordinator (Exchange Director)

ANNUAL MEMBERSHIP DUES

INDIVIDUAL MEMBERSHIP \$35.00

FAMILY MEMBERSHIP \$50.00

I have enclosed my membership dues of \$ _____

Today's Date Is _____

PLEASE MAKE CHECK PAYABLE TO FFGA AND MAIL TO:

**LINDA FOLEY
1010 FREEDOM LANE
ROSWELL, GA 30075**