

PoCoMo Mothers of Multiples Club 2008 - 2009 Membership Form

Name: _____ Birthday: _____

Spouse/Partner's Name: _____ Birthday: _____

Address: _____ Phone No.: _____

_____ E-mail: _____

Do you prefer to be contacted by telephone or email or does it matter? _____

Children's Names

Birthdays and Year

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Please indicate (√) if your twins/triplets are: _____ Fraternal Boys _____ Fraternal Girls
_____ Identical Boys _____ Identical Girls
_____ Fraternal Boy & Girl

How will you be paying your membership fee (\$35)? _____ Cash _____ Cheque
(Please make cheques made payable to PoCoMo Twins Club.)

How would you like to receive information about Club activities? _____ Phone _____ E-mail

In what club activity would you be willing to help out? *(Please check one.)*

_____ Christmas Party _____ Swap Meets _____ Summer Picnic _____ Meeting Set-up/Clean-up

Your **\$35** annual membership pays for costs incurred in sending out our monthly newsletter (*Twin Talk*) and helps defray the costs of hall rental, speakers and special club events. You also become a member of the Northwest Association of Mothers of Twins (NWAMOTC) and receive their quarterly newsletter.

We are an informal group and welcome new parents, guardians, foster parents and expectant parents.

If you are unable to attend the next monthly meeting, please mail this form and membership fee to:

Debby Moran
1651 McPherson Drive
Port Coquitlam, BC
V3C 6C9 Canada

NEW MEMBERS, PLEASE COMPLETE REVERSE.