

Membership Application

Please PRINT this page, fill out the information LEGIBLY, and mail with your check to:

Golden Link Membership PO Box 92398 Rochester, NY 14692

I am (check one): □ New Member		Member □ F	Renewing Member	□ Previous Member	
Members	hip Type and C	ost (check one):			
1 Year:	□ Single \$25	□ Family \$35	□ Folk Friend \$50	□ Gold Patron \$80	
3 Year:	□ Single \$67	□ Family \$94	□ Folk Friend \$135	□ Gold Patron \$215	
5 Year:	□ Single \$106	□ Family \$148	□ Folk Friend \$210	□ Gold Patron \$340	
	Tax Deductible Dorount \$				
□R	Receipt Required fo	r this donation. Sen	d by □ Email	□ US Mail	
First Name	e		I ast Name		
City, State	e, Zip				
Phone:		Email ِ			
For Family	y, Folk Friend, or	Gold Patron mer	nbership, please enter	family members:	
Naı	me		Email		
Name			Email		
Name			Email		
Name			Email		
ivai			Fmail		
	me		LIIIGII		

* Golden Link is a non-profit 501(c)3 organization. THANK YOU for your support!