

2025 Friends of Fendall Hall Membership Application

Please complete the following form and mail or email to:

Fendall Hall

917 W. Barbour Street, Eufaula, AL 36027

fendallhall@gmail.com

Yes, I/We want to help support Fendall Hall.

This is a: ____ New Membership; ____ Renewal; ____ Change of Address/Phone

Contact Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Annual Membership Type:

____ \$35 Single; ____ \$55 Family; ____ \$100+ Patron; ____ \$500+ Benefactor; ____ \$1000+ Sponsor;

____ \$35 Non-Profit Organization; ____ \$70 Business

Total Amount Enclosed: _____

Payment Method: ____ Visa ____ Mastercard ____ Discover ____ Other Credit Card

____ Check/Money Order (enclosed) Make checks payable to the Friends of Fendall Hall.

Credit Card Information: I hereby authorize the Friends of Fendall Hall, Inc. to apply the following amount to my membership/renewal _____.

Credit Card Number: _____ Expiration: _____ CVV #: _____

Name as it appears on card: _____

Signature: _____

____ Yes, I would like to be added to the Friends of Fendall Hall email list to be the first to know about events.

Friends of Fendall Hall, Inc. is a 501(c) 3 Corporation. Donations are tax deductible to the extent allowed by law.

Thank you for your continued support!