

SOUTH BAY LIVING FOOD COMMUNITY

MEMBERSHIP APPLICATION

SEND THIS FORM & CHECK TO: South Bay Living Food Community, 692 Distel Drive, Los Altos, CA 94022

MEMBERSHIP TYPE: Individual (\$30) Family (\$50) Business (\$150)

COMMUNITY DIRECTORY: Do NOT list my: Name Address Phone Email Address

Member Information—PLEASE PRINT LEGIBLY

Please review the mailing label on the reverse side of this form, if you received this form by mail. Please provide corrections to your name and address, your email address, if you have one, and phone number(s). We announce extra events and distribute reminders via email. SBLFC does not sell its electronic database to third parties. We do provide mailing labels to members offering raw-food products & services.

Name _____

Additional Names (for family membership at same address)

Address _____

City _____ **State** _____ **Zip** _____ - _____

Phones: **H** ____ - _____ **W** ____ - _____ **Fax** ____ - _____ **Cell/Pgr** ____ - _____

Email _____ **Web site** _____
PLEASE print clearly.

I want to contribute Leadership Team Helping at events Administrative support Serving on a committee

I can also help by: _____