

KIDNEY TEXAS, INC.

www.kidneytexas.org

2020 Membership Form

Sandra Secor President

**Barenda Hino
Therese Rourk
First Vice Presidents/Membership**

Name _____ Spouse's Name _____

Social Listing _____

(please circle) Mr. and Mrs. - Dr. and Mrs. - Mrs.- Mr.- Dr. - Ms. - Miss or as shown above

Address _____

City _____ State _____ Zip _____

Home _____ Cell _____

Email _____

_____ New Member

_____ Renewing Member

_____ Lifetime Benefactor \$1,000

_____ Active \$60

_____ Sustaining \$500

_____ Men of Kidney \$60

_____ Contributing \$250

_____ Young Adult (21 to 35) \$40

_____ Patron \$100

_____ I am a Lifetime Member and would like to make Donation of \$ _____

_____ I would like to make a donation of \$ in honor of _____

_____ Newsletter by U.S. mail \$5.00 _____ Newsletter by email at no charge

_____ I would like serve on the Luncheon Committee.

Name on Card _____

Credit Card # (AmEx/ MC/ Visa) _____ Exp. Date _____

My check in the amount of \$ _____ is enclosed

Questions, please email KidneyTexas, Inc. ~ kidneytexas@sbcglobal.net

To be listed in the directory, please return your Membership Form by March 15, 2020.

Please send payment to:

KidneyTexas, Inc. ~ 6138 Berkshire Lane, No. 10, Dallas, Texas 75225

You may FAX this form with credit card information to 214-368-3635

OR

You may pay online at www.kidneytexas.org