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| **Membership / Donation Application** |  |

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| NAME: | | |  | | | | | | |
| ADDRESS: | | |  | | | | | | |
| CITY: |  | | | | STATE: |  | | ZIP: |  |
| PHONE (DAYTIME): | | | |  | PHONE (EVENING): | |  | | |
| E-MAIL: | |  | | | | | | | |
| ALTRA MEMBER:  Yes  No | | | | | | | | | |

Yes, I want to help support the Altra Foundation’s Financial Education initiatives.

I have enclosed my tax-deductible contribution:

|  |  |  |  |
| --- | --- | --- | --- |
| $5 Lifetime Membership dues | | | |
| Additional donation:  $10  $25  $50  $100 | | Other $ |  |
| This donation is: | | |  |
| In Memory of: |  | | |
| In Honor of: |  | | |

|  |  |
| --- | --- |
| Please send an acknowledgement to: | |
| Name: |  |
| Address: |  |
| City/State/Zip: |  |

**Please make checks payable to: Altra Foundation, Inc.**

Drop off at any Altra Federal Credit Union branch or mail to:

Altra Foundation, Inc. - Membership

PO Box 98 Onalaska, WI 54650

The Altra Foundation is a non-profit corporation with tax-exempt status under paragraph 501(c)(3) of the Internal Revenue Code of 1986. Membership fee and any additional donations are 100% tax deductible. We respect your privacy; the Altra Foundation does not sell or exchange donor lists.