

FUNERAL CONSUMERS ALLIANCE OF THE TRIANGLE

Membership or Transfer or Donate Form

I agree with the purposes of the Funeral Consumers Alliance of the Triangle and wish to join or transfer

Complete this form; then add your check and mail to us

* Means field is required.

Name

*First: _____ *Last: _____

*Address _____

*City _____

*State _____

*Zip _____ Plus-4 _____

Telephone _____

*Email _____

Are you now a member of the Funeral Consumers Alliance of the Triangle?

___ Yes

___ No

___ Transfer From Which FCA Affiliate? _____

Item: \$

___ Tax Deductible Donation

___ Become a member of FCAT (\$35 suggested donation)

or:

___ Transfer membership to FCAT (\$20 suggested donation)

Please mail with donation to: FCAT, P O Box 5051, CARY NC 27512-5021

OR --- make donation online from fcata-nc.org.

Thank you from the FCAT Board.