

**Bethlehem Methodist Episcopal Cemetery Restoration Organization
(BMECRO)**

Membership Form

Name: _____

Address: _____

Phone: _____ **Email:** _____

Membership Level:

_____ **Associate Member** – A non-voting member with no obligation to attend monthly meetings and/or events. Associate Members will receive organizational and internal updates via email.

_____ **Active (Voting) Member** – A member who is required to attend meetings and participate in cemetery events. This membership level requires dedication and commitment to the internal operations of the BMECRO.

Membership Dues: \$60 for the calendar year (or \$5 a month).

Memberships are a calendar year commitment.

Dues should be paid to GiveButter or mail.

Signature: _____ **Date:** _____

Make Checks Payable to: BMECRO

Mailing Address: P.O. Box 914, Archer, Florida 32618

Questions? Call 352.495.3035



<https://givebutter.com/qyUXAp>