

## WISCONSIN POLKA BOOSTERS MEMBERSHIP INFORMATION

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Married

Name:				
Spouse / Friend Name	e:			
Address:				
City:		State:	Zip:	
<i>-</i>	ALL OTHER INFORMATI	ON IS OPTIONA	AL	
Phone:	Email:			
Occupation:				
Name of Band, Hall, o	r Organization:			
New Member Being S	ponsored by:			

Single

MEMBERSHIP FEE: \$25 per Person or Couple

FOR MORE INFORMATION CALL KATHY DRAVER AT (414)301-4296
MAKE CHECK PAYABLE TO: WISCONSIN POLKA BOOSTERS

Mail check to: Kathy Draver 6631 South 26th Street Oak Creek, WI 53154