

**Membership Form**

Please fill out all of the fields below and mail this form to:

Cabinet Resource Group

PO Box 238

Heron, MT 59844

Please enclose a check for your desired membership level below. All membership donations are tax deductible.

[ ]  Individual Membership $15

[ ]  Family Membership $25

[ ]  Supporting Membership $50

|  |  |
| --- | --- |
| Name: |  |
| Email: |  |
| Phone: |  |
| Address: |  |

Are you interested in volunteering with Cabinet Resource Group?

[ ]  Yes [ ]  No [ ]  Maybe (need more information)