

2025 New Member Application

Become a member of the Friendship Force and make friends within your own community and around the world.

Name				
Address				
City/State	2	Zip		
Primary Phone	<i>k</i>	Alternate Phone		
	on will be published in ou			th(Optional)
I	ndividual Membership \$4	0.00 \$		
(Contribution	\$		
1	TOTAL ENCLOSED	\$		
Name for Name B	adge			
I	ndicate Badge type: Clip	Lanyard with C	Clip Magnet	
Make check paya	ble to: Friendship Force	of Wisconsin-Madisor	ı	
Mail to:	5809 Julia Street Madison, WI 53705			

Questions????? Call Hal at 608-440-0653 or e-mail ffwis.membership@gmail.com

Our committees and activities support our mission and we ask every member to take an active role in our club. Please indicate your interests. Check as many as you like.

What are your interests? How can you support your club? Check all that apply. Please check at least one.

Activity Support	Journey Support	Club Support	
Adopt-A-Highway	Journey Coordinator	Board Member	
Book Club	Ambassador	Journey Manager	
Club Picnic	Host/Co-Host	Membership - Welcome/Mentor	
Dining on the 6th	Day Host	Outreach - Program Speaker	
Second Harvest Foodbank	Interviewing	Communications/Publications	
Let's Walk - Let's Hike	Welcome/Departure	Website/Newsletter/Graphic Arts	
Let's Snowshoe - Let's XC-Ski	Driver for Club Event	Finance/Journey Treasurer	
Bike Rides	Provide Food for Club Event Snack, Casserole, Dessert, Soup Performer/Singer/Piano, Etc Photographer	Misc - Nominating/Adhoc/ Etc	
Day Trips		Member at Large	
Cultural Food Experience		Activities and Programs	
Host Social Dinners		IT Skills	
		Historian	

How did you hear about Friendship Force of Wisconsin-Madison?

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We are a 501 (c) (3) organization. Your tax contribution may be tax deductible to the extent allowed by law.