

The Friendship Force of Wisconsin - Madison

2026 Membership Renewal

PLEASE VERIFY ALL INFORMATION and NOTE ANY CHANGES ON THIS FORM. Return by 1/31/2026.

Member Since:

Primary Phone Number:

Alternate Phone Number:

E-Mail Address: *If Blank Please Provide*

Unless you check here you grant permission to use your photo in club publications.

Birth Month & Day: ____/____ Optional

FFWM Membership is per person over age 17 \$ 80.00
 \$70 - FFI Membership
 \$10 - FFWM Membership

FFI Member #

OPTIONAL TAX-DEDUCTIBLE DONATIONS:

FFWM - General Operating Fund \$ _____

Other _____ \$ _____

Total \$ _____

PLEASE VERIFY ALL INFORMATION ON THIS DOCUMENT, MAKE CORRECTIONS AND RETURN THIS FORM THANK YOU

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

Activity Support

- Adopt-A-Highway
- Book Club
- Club Picnic Assistant
- Dining on the 6th
- Second Harvest Foodbank
- Let's Walk - Let's Hike
- Bike Rides
- Cultural Food Experience
- Provide Food for Club Event
Snack, Casserole, Dessert, Soup
- Translator

Journey Support

- Ambassador Outbound Journey
- Home Host/Co-Host
- Day Host
- Host Social Dinners
- Interviewing Ambassadors
- Welcome/Departure
- Driver for Club Event
- Photographer
- Journey Coordinator
- Journey Treasurer

Club Support

- Elected Club Officer
- Journey Manager
- Historian
- Membership - Welcome/Mentor
- Outreach
- Communications/Publications
Website/Newsletter/Graphic Arts
- Financial Expertise/Skills
- Misc - Nominating/Adhoc/ Etc
- Activities and Programs
- IT Skills & Support
- Member at Large

Other languages you speak:

Are you willing to translate? Yes

Language _____

List of Organizations you are affiliated with:

RETURN FORM & CHECK TO:
The Friendship Force of WI - Madison
5809 Julia Street
Madison WI 53705

Return this form by January 31, 2026

Revised 1-7-2026-2