Please be aware that sending in the membership form is not enough. You MUST sign up on-line at http://www.meetup.com/WWPlusOurFriends/ to see event information. This is a Meetup requirement, not WW+Fs. Thank you for understanding.
Please remember to send your membership dues of $30.00 with your application.

Widows & Widowers plus Friends

P. O. Box 5035
Limerick, PA 19468-0935

☐ **Widow/Widower** ☐ **Friend (lost a significant other through death)**

Name: _____

Address: _____

_____

Home Phone: _____

Mobile Phone: _____

e-mail: _____

******By submitting this form, you agree that it will be shared with the group******
(Not sharing your e-mail address may result in you not getting notices of events)

Emergency Contact Name/Phone Number:

_____

Birthday: _____ _____
Month **Day**

Proof of Loss: ☐**obituary** ☐**death certificate** ☐**prayer/memorial card** ☐**grave marker** ☐**other**
(Please define "other" _____**)**

This group is serviced & maintained by its members. You will be required to be an organizer and agree to either help with hosting events or serving on a committee. Your involvement does not have to be more than a few times per year.

By joining this group you agree:

- ***to the rules of membership as posted by Meetup and Widows and Widowers plus Friends.***
- ***you will never hold the any of the organizers, events hosts, their accessors or assigns, liable for any type of injury.***
- ***you are solely responsible for your personal safety - no one else.***
- ***to pay annual dues of $30.00 per year per member.***

Agreed and Accepted:

_____ _____
Signature **Date**