



PO Box 2214, Asheville, NC 28802

www.ashevillesistercities.org

ASHEVILLE SISTER CITIES, INC. MEMBERSHIP FORM

Please print clearly.

Date _____

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Primary Phone _____

E-mail _____

Committee involvement is encouraged. Which of these activities is of interest to you?

- Event planning Newsletter Home hosting
- Membership Fundraising Publicity/PR

In which Sister Cities are you most interested?

- Saumur, France San Cristóbal de las Casas, Mexico Karpenisi, Greece
- Osogbo, Nigeria Valladolid, Mexico Vladikavkaz, Russia
- Dunkeld-Birnam, Scotland

What are your language skills?

French Proficiency Level _____ Spanish Proficiency Level _____
 Greek Proficiency Level _____ Russian Proficiency Level _____
 Other Language _____ Proficiency Level _____

Please check one: **New membership** **Renewal**

Membership Level & Dues

Membership accounting runs from January through December of each year.

Student \$10.00 Individual \$25.00 Couple/Family \$50.00 Corporate \$150.00

Giving Society Membership (\$100.00 or more each calendar year): \$ _____

Please specify amount.

Additional Contributions:

General Fund: \$ _____

City Committee: \$ _____ for the _____ Committee *(Please specify city name)*

Contribution to Giving Society (any amount): \$ _____

Asheville Sister Cities, Inc. is a non-profit 501(c)3 organization. Dues and contributions are tax deductible. Mail your completed Membership Form and your check to

**ASHEVILLE SISTER CITIES, INC.
PO BOX 2214
ASHEVILLE, NC 28802**

Thank you and Welcome to Asheville Sister Cities!