

2017 CGS of NC Membership Form

Why Join? This is an investment for you and your family's future. CGS of NC allows us an avenue to network and promote our culture and values. We thank you deeply for your support.

Member Name: _____ (First, Last)

Spouse Name: _____ (First, Last)

Mailing Address: _____

City: _____ State: _____ Zip: _____

County: _____

Phone Number: _____ Cell Phone: _____

Email Address: _____

Elders:

Name(s): _____

Children/Grand Children:

Name(s) and Age(s): _____

Payment:

2017 Membership Dues: \$250 per family

Check

Member Signature: _____ Date: _____

CGS of NC Rep. Signature: _____ Date: _____

I would like to take an active part in our organization by:

Volunteering at events

Becoming a Committee Member

Scan and Email to: info@cgs of nc.com

Mail to: **CGS of NC**
2908 US HWY 301 SOUTH
Wilson, NC 27893