



AFRECS Membership Form

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Mobile Phone	
E-Mail Address	

Membership Type

Individual Organizational

Fee Schedule:

- \$15 for individuals
- \$100 for churches or organizations with an annual budget of under \$250,000
- \$250 for churches or organizations with an annual budget of \$250,000 to \$500,000
- \$500 for churches or organizations with an annual budget of over \$500,000

Membership is from January 1 - December 31 of the year in which you make your payment.

Amount Enclosed: _____

Please send this form and your payment to:

AFRECS
PO Box 12026
3737 Seminary Road
Alexandria, VA 22304