

2019 MCDO Membership Form

Business Membership \$60.00 _____		Family Membership \$15.00 _____	
Please indicate if you would like a receipt for tax deduction:		_____	
Name:		Date:	
Address:			
City:		State:	Zip:
Phone:		Email: (to be used for minutes distribution)	

*Please make checks payable to: Marion Community Development Organization
Please send remittance to: MCDO - PO Box 65 - Maria Stein, OH 45860-0065*