

2018 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: _____	

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