

**LATHRUP VILLAGE COMMUNITY FOUNDATION****ANNUAL MEMBERSHIP**Name \_\_\_\_\_  
*Your name(s) as you wish your Membership to be listed.*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

 Payment enclosed in the amount of \$ \_\_\_\_\_ . I/We pledge to remit payment of \$ \_\_\_\_\_ within 30 days.\_\_\_\_\_  
*Signature (Pledges to the LVCF are not legally binding.) Date**Make checks payable to LATHRUP VILLAGE COMMUNITY FOUNDATION.  
Contributions are tax deductible. Michigan license to solicit N MICS 23699.* \$100 Sustaining Member \$50 Contributor Member  \$500 Donor Member \$25 Member  \$1,000 Major Donor Member Other Contribution \$ \_\_\_\_\_*Your gift of \$25 or more provides for Annual Membership in the  
Foundation through December 31, 2008.***LIFETIME MEMBERSHIP** \$5,000 Life Donor Member  \$10,000 Life Patron Member*Life Membership is valid for the natural life of the Member.**All Membership levels and privileges extend to the  
spouse or domestic partner of the named Member.***LATHRUP VILLAGE COMMUNITY FOUNDATION****ANNUAL MEMBERSHIP**Name \_\_\_\_\_  
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