

Membership / Donation Application



NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE (DAYTIME): _____ PHONE (EVENING): _____

E-MAIL: _____

ALTRA MEMBER: YES NO

Yes, I want to help support the Altra Foundation's Financial Education initiatives.
I have enclosed my tax-deductible contribution:

\$5 Lifetime Membership dues

Additional donation: \$10 \$25 \$50 \$100 Other: \$ _____

This donation is:

In Memory of: _____

In Honor of: _____

Please send an acknowledgement to:

Name: _____

Address: _____

City/State/Zip: _____

Please make checks payable to: Altra Foundation, Inc.

Drop off at any Altra Federal Credit Union branch or mail to:

Altra Foundation, Inc. - Membership

PO Box 98

Onalaska, WI 54650

The Altra Foundation is a non-profit corporation with tax-exempt status under paragraph 501(c)(3) of the Internal Revenue Code of 1986. Membership fee and any additional donations are 100% tax deductible. We respect your privacy; the Altra Foundation does not sell or exchange donor lists.