



Rivera Memorial Foundation, Inc.

Empowering communities by developing human potential and growth

Official use only:

Membership #: _____
Membership fee: \$ _____
Method of Payment: _____
Check #: _____
By: _____

Membership Application

Category of Membership: ☐ New ☐ Renewal

Name: _____
First Middle Initial Last

Children's Names (if applicable):

Mailing Address: Business Address: Phone Number

Mobile Phone Number

Email Address: _____

Please indicate how you learned about RMF, Inc.: _____

Are you interested in becoming actively involved? (Please check one below)

- ☐ Yes, I would like to become actively involved, and have time to devote.
☐ Yes, I would like to become actively involved, but have limited time to devote.
☐ No, I do not wish to be actively involved, but do wish to take advantage of RMF, Inc. membership benefits.

If you would like to be actively involved and have time to devote would you like to hold a position in a committee or be part of the board? ☐ Yes ☐ No

If you answered yes, what position or committee (membership, communications/website, scholarship/community, social) are you interested in? _____

To become a member, please **fill out this application completely** and submit it with your **membership fee** to any RMF Board member or mail it to:

Jessica Rivera, Ed.S.
RMF, Inc.
186 Cherry Street
Waterbury, CT 06702
Or visit us at www.RMFINC.ORG

I would like to become a member of RIVERA MEMORIAL FOUNDATION, INC. and have filled out this application completely and accurately. I am submitting dues of \$ _____ along with my application and agree that this information will held on my record for as long as I am a member. I will also follow the mission statement and bylaws passed by the organization which I have read. I would also like to sponsor \$ _____ to further benefit the organization. All dues and business sponsorships could be a business tax deductible with our 501(c)(3) non-profit status. Please consult an accountant.

Applicant Signature: _____ Date: ____/____/____

The RMF Membership Fee will be \$20 per year for each family member starting from the date of the registration is received. There is no prorated fee. This fee is non-refundable and will be used 100% towards all RMF non-profit scholarships, meetings and events. Make checks payable to RMF, Inc.