

**Funeral Consumers Alliance of Sarasota-Manatee, Inc.**  
**P.O. Box 15833**  
**Sarasota, FL 34277**

Date \_\_\_\_\_

' I wish to become a new member of the Funeral Consumers Alliance of Sarasota-Manatee, Inc.  
Suggested membership donation is \$25 per member.

' I wish to transfer my membership from \_\_\_\_\_  
Suggested transfer donation is \$10.

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Additional family members at the same address \_\_\_\_\_

\_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Please send a membership brochure to: \_\_\_\_\_

\_\_\_\_\_

Please send me \_\_\_\_ additional brochures to share with others.

Spread the word! If you would like to have a speaker for one of your civic or church groups, please call us at 941-953-3740.

**Volunteer!**

Our group depends on members helping each other. If you have some time and interest, please let us know. Yes, I would like to help with:

- |                        |                      |                |
|------------------------|----------------------|----------------|
| ' serving on the board | ' speakers bureau    | ' newsletter   |
| ' funeral price survey | ' membership records | ' as treasurer |
| ' legal consultant     |                      |                |