



**Your membership supports the mission of C.C. Young, provides a voice in the local churches and the community, promotes volunteerism, and provides funds in support of its ministries.**

Name \_\_\_\_\_ / \_\_\_\_\_  
 Last Name First Name Spouse's Name

Address \_\_\_\_\_  
 Street City Zip

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

**Please indicate membership level:**

- \_\_\_\_\_ I am already a member through my United Methodist Women's group
- \_\_\_\_\_ I already hold a Legacy Lifetime Membership
- \_\_\_\_\_ \$ 10.00 Regular Membership / paid yearly
- \_\_\_\_\_ \$ 100.00 Legacy Lifetime Membership / one-time payment

**Payment Preference:**

\_\_\_\_\_ I have enclosed my CHECK payable to CC Young for \$ \_\_\_\_\_ or CASH \$ \_\_\_\_\_

\_\_\_\_\_ CHARGE my payment to my: \_\_\_ VISA \_\_\_ MC \_\_\_ Amex

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Sec Code \_\_\_\_\_

Billing Address *if different than above* \_\_\_\_\_

Name on card \_\_\_\_\_ Signature \_\_\_\_\_

**Thank you for your support of the CC Young Auxiliary.** If you would like to learn more about volunteer opportunities within our programs, please indicate below:

- |  |   |
|--|---|
| _____ General Meetings (greeter, food) | _____ Membership development (church/CCY) |
| _____ General Meeting Programs         | _____ Umphress Terrace                    |
| _____ Fall Fundraiser                  | _____ CC Young New Year's Eve Noon Party  |
| _____ Spring Fundraiser                | _____ Vista Gift Shop (weekday shift)     |

Please mail this completed form with payment to:

**Lynne Mabry 1914 Skillman St. Ste. 110-191 Dallas, TX 75206**

Questions – please contact Brianna Brown (214-507-4425; [Brianna.brown@sbcglobe.net](mailto:Brianna.brown@sbcglobe.net)) or Judith Baner (214-686-0714; [jbanes@smu.edu](mailto:jbanes@smu.edu))

Your contribution is tax deductible to the extent allowed by the law. CC Young is a 501(c) (3) nonprofit organization.