

## Cleveland Stroke Club Membership Form

May 2021 - 2022

Dear Members: Your 2020-21 Cleveland Stroke Club membership is due by May 15, 2020. In order to support your Club, please complete the form below and mail it along with a check (payable to: Cleveland Stroke Club)

**Dues are paid by the  
May meeting: the 3<sup>rd</sup>  
Wednesday of May**

Mail to:  
Cleveland Stroke Club  
c/o John Pumper  
7954 Walcott Way  
Mentor, OH 44060

***It is necessary to complete this form each year so that we can keep our records updated. Thank you for your continued participation and support.***

(Please Print)

Date \_\_\_\_\_

Name (stroke survivor) \_\_\_\_\_

Name (caregiver) \_\_\_\_\_

Spouse (circle) Yes No

Supporter (neither caregiver or stroke survivor) \_\_\_\_\_

Address \_\_\_\_\_

Number

Street

Apt.#

City

State

Zip Code

Home Phone Number

Cell Phone Number

e-mail address \_\_\_\_\_

Birthdays (month and day):

Survivor: \_\_\_\_\_ Caregiver: \_\_\_\_\_ Supporter: \_\_\_\_\_

Wedding date (month/day/year): \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Annual Dues - \$8.00 per person – or - \$16.00 for a stroke survivor and caregiver (tax deductible)

Amount enclosed - \$ \_\_\_\_\_ (tax deductible contributions are gladly accepted at any time)

### ReFocus:

- I prefer to receive the ReFocus in Email or on the Web
- I prefer to receive the ReFocus in my mail box at home

### Club Roster

- Include my name, address, phone and e-mail address in the Club Roster (Cross off anything you do NOT want included in our Roster).
- No, I do not want my name to appear in the Club Roster.