

Cleveland Stroke Club Membership Form

May 2022- 2023

Dear Members: Your 2022-23 Cleveland Stroke Club membership is due by May 15 , 2022. 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 3rd
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.