



TEEN board

MEMBERSHIP APPLICATION

NAME: _____

EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ CELL #: _____

AGE: _____ GRADE: 7TH 8TH 9TH 10TH 11TH 12TH

PARENT'S NAME: _____

EMAIL: _____

HOW WOULD YOU LIKE TO BE INVOLVED? (select all that apply)

- HFC 5K "TEEN BOARD" TEAM (RUNNER, WALKER) - SEPTEMBER 24, 2016
- HFC 5K (VOLUNTEER) - SEPTEMBER 24, 2016
- HOSPITAL CARE PACKAGES (DELIVERY) - ONGOING
- HOSPITAL ROOM DÉCOR - ONGOING
- NIGHT AT THE MUSEUM - HALLOWEEN EVENT (VOLUNTEER) - OCTOBER 2016
- HOLIDAY HEROES ADOPT-A-FAMILY (JOIN A TEAM TO ADOPT/SHOP)—DECEMBER 2016
- VALENTINE'S (DECORATING, CRAFTS, GAMES WITH KIDS) - FEBRUARY 2017
- MOVIE DAY (DECORATING, CRAFTS, GAMES WITH KIDS) - JUNE 2017
- GIFT CARD DRIVE (HELP GET GAS, RESTAURANT, HOTEL GIFT CARDS FOR OUR FAMILIES) - ONGOING

TEEN BOARD MEMBERSHIP

MEMBERSHIP DONATION (check one):

- ANNUAL MEMBERSHIP \$25 I HAD/HAVE CANCER - *No Membership Fee*

ENCLOSED IS MY CHECK PAYABLE TO **HFC TEEN BOARD DALLAS** FOR \$ _____

- VISA MASTERCARD AMEX

CREDIT CARD #: _____ EXP. _____ CVV _____

PARENT'S SIGNATURE: _____

*Heroes for Children advocates for and provides financial and social assistance
to families with a child (0-22 years of age) battling cancer.*