



Gay Fathers of Greater Boston
Membership Application

www.gayfathersboston.org
617-742-7897
info@gayfathersboston.org

To join or renew your membership, please complete the application below and remit the appropriate membership dues. If you are renewing your membership, just fill out any information that has changed and sign.

Please fill out all required elements marked with a triangle: ▶ Other information is optional. Information on this form is confidential, and will not be available to GFGB members unless designated below.

▶Name		▶Membership	Age
		<input type="checkbox"/> New <input type="checkbox"/> Renewal	
Address			
Street		Apartment #	
City		State	Zip Code
▶Phone			
Daytime	Evening	Cell	
▶Email address		▶Publish to all GFGB members:	
		<input type="checkbox"/> Name <input type="checkbox"/> Address <input type="checkbox"/> Email <input type="checkbox"/> Daytime phone <input type="checkbox"/> Evening phone <input type="checkbox"/> Cell phone <input type="checkbox"/> Partner's name	
Marital status			Number of children
<input type="checkbox"/> Married to wife <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Single <input type="checkbox"/> Married to husband			
Have partner/husband?	Partner/Husband Name		
<input type="checkbox"/> Yes <input type="checkbox"/> No			
Want to be contacted? Want to get involved? Suggest an activity? Other comments?			
▶By submitting this application, I agree to preserve the confidentiality of all information regarding GFGB members.			
Signature		Date	
▶Annual Membership dues enclosed: (make checks payable to "GFGB")			
<input type="checkbox"/> Single: \$25 <input type="checkbox"/> Couple: \$35 (each person should complete a separate application) <input type="checkbox"/> I am contributing an additional \$_____ donation to GFGB			
▶Make checks payable to "GFGB" and submit with this form, or mail to:			
GFGB P.O. Box 550030 Waltham, MA 02455-0030			