**Did you complete this form? If no, please do so soon.**

**Sauk County Home and Community Educators (SCHCE) 2023 Membership Form**

If you have questions, please call the membership chair Donna Ochsner 608-574-2133 or [dochsner47@gmail.com](mailto:dochsner47@gmail.com) Clubs are welcome to send all members' forms together, or each member can send hers individually to Cheri. If you fail to send dues you will not receive the next newsletter.

1. **Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Check one:**

* I am a member of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_club
* Individual member

1. **Any changes on the following information current: (make changes on the blank space):**

* Address yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Telephone number yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Cell phone yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Any other changes yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I would like to receive my newsletter via email yes no \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I agree to have my photo released for use in newspapers, etc. yes no

1. **Please sign this membership form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Club Presidents…send a list of officers**

**Due November 15, 2022**

**Send a $10 check for one year membership; written out to SCHCE to:**

Cheri Rhinehart E9472 South Avenue Reedsburg, WI 53959