

Padrinos of Valley Children's Healthcare Membership Form

Yes, I will join Padrinos at the following membership level:

- **Active Member:** Enclosed is my annual check of \$100
- **Emeritus Member (former members only):** Enclosed is my lifetime check of \$800
- **Life Member (new members):** Enclosed is my lifetime check of \$1000

Please use the preferred contact information for all communication:

Full Name: _____

Spouse's Name: _____

Company: _____

Title: _____

Email: _____

Address: _____

City: _____ State/Zip _____

Cell: _____ Work: _____

Please make the check payable to: *Padrinos*

Please mail check to:

Attn: JD Heberger, Treasurer
Heberger & Company
5090 N. Fruit Avenue Ste. #102
Fresno, CA 93711

For questions or to pay by credit card, contact Finn Telles, Membership Chair, at
finttelles@gmail.com or 559-313-2246