



Membership Application for the Dunedin Council of Organizations

New Application ____ Renewal ____ (If contact info has not changed just write "no change")

Type of Member **Individual \$25** ____ **Not-for-Profit Organization \$40** ____ **Business \$75** ____

Company/Not-for-Profit/Individual Name _____

Name of company representative _____

Title of company representative _____

Street address _____

City _____ State _____ Zip Code _____

Business Phone (____) _____ Personal Phone (____) _____

Email Address (will be used for meeting notices & newsletters) _____

Optional for organizations and businesses: Additional individual to receive email notice

Name _____

Title _____

Email Address _____

**Information to be included in the public access membership directory
on our website www.dunedincouncil.org: (optional)**

Company/Not-for-Profit/Individual Name _____

Business Website/Facebook Page _____

Phone (____) _____

Email Address (will be used for meeting notices & newsletters) _____

Online location of logo for directory _____

Note: logo image file can also be emailed to info@dunedincouncil.org

There are two ways to join/renew:

1) Complete this form online and pay at www.dunedincouncil.org

2) Submit your check along with this completed form at a meeting or mail them to:

Dunedin Council of Organizations, P.O. Box 180, Dunedin, FL 34697-0180