

Charlottesville Committee on Foreign Relations
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MEMBERSHIP FORM

NOTE: For couples, please list both names and interests below (1&2). Indicate preferred form of address; e.g. Dr., Mr., Ms. Annual dues are the same for individuals or couples. Please see attached information sheet for CCFR operating structure.

1. _____ Occupation _____ Retired? Y N

2. _____ Occupation _____ Retired? Y N

Home Address: _____

City _____ State _____ ZIP _____ Phone _____

*Email: _____

Citizenship: 1. _____ Education: 1. _____

2. _____ 2. _____

Brief summary of occupation, profession and international travel experience _____

_____(Continue overleaf if additional space is necessary)

CCFR member(s) with whom you are acquainted: _____,

_____, _____

Your Signature(s): _____ Date: _____

*Twice each year CCFR compiles and publishes a list of all members names, addresses, telephone and e-mail contact information solely for the use of the membership. E-mail use is strictly limited to the committee's administrative activities and none of this information is made available to persons or organizations outside the membership. E-mails directed to more than one member use BCC protocol to maintain privacy of addresses

Names as you prefer them to appear on name tags

1. _____ 2. _____

Please include your check for annual dues of \$120.00 when mailing this form