



COKER CREEK HERITAGE GROUP
Membership Application

Business Membership \$50.00

Associate Membership \$15.00

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone No. _____ Fax _____

E-Mail _____

Business Name _____

Signature _____ Date _____

-----Cut here and retain-----

Received from _____ the amount of \$ _____ for annual dues

for the **COKER CREEK HERITAGE GROUP**, a non-profit organization. **Your donation of money, time and/or materials supports our mission and is sincerely appreciated.**

Sincerely,

Betty McRee
President

2580279