



## 2017 TWIG MEMBERSHIP FORM

Please use the form below to renew your TWIG membership. Each TWIG member is required to pay their own dues of \$10.00 with a personal check, money order or credit card. Please make checks out to **TWIG of Nationwide Children's Hospital**. If you would like to charge your dues to a credit card, please call Cynthia Laux at 614-355-5413 or visit [NationwideChildrens.org/TWIG](http://NationwideChildrens.org/TWIG). This form is available on the TWIG webpage.

**Note: Per IRS regulations, membership dues CANNOT be paid with a TWIG Treasury Check and will be returned.**

TWIG # \_\_\_\_\_ I am an:       Active Member       Alumni Member

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mail Membership Forms with your \$10.00 dues by December 31, 2016 to:  
Nationwide Children's Hospital Foundation  
ATTN: TWIG MEMBERSHIP  
P.O. Box 16810  
Columbus, Ohio 43216-6810