



Stop Abuse For Everyone

A Human Rights Agency

Membership Form

First Name: _____ Last Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Membership Level: (Check-Off)

_____ SAFE Membership (\$30.00)

_____ Silver Membership (\$100.00)

_____ Gold Membership (\$500.00)

Checks are also accepted at the address provided below.

Additional Information Needed - Silver and Gold Members Only

Membership Wall Preference: (Check-Off)

_____ Yes, I would like to be on the Membership Wall.

_____ No, I would not like to be on the Membership Wall.

Membership Wall:

Recognition of membership on the SAFE website with an optional photo.

If you would like to submit a picture, please send the photo to the email director@stopabuseforeveryone.org.

T-Shirt Size: (Check-Off)

_____ Small _____ Medium _____ Large _____ X-Large

Thank you for supporting "Stop Abuse For Everyone!"

P. O. Box 236, 4570 Bicknell Rd, Marbury, MD 20658-9998