

## **2024 Membership** □ Renewal □ New Member

Business Na	ame:			
Mailing Address:				_
				_
Person attending meetings:				
Position or title in above business:				
Phone #:		(extn	)wk	cell
E-mail Address:				
Business Web Site Address:				
Recommen	ded by:		(Person who recruited	/ou)
ANNUAL DUES: (check the box below that applies to you): All member dues and guest fees include monthly meal cost (12 meetings per year)				
Individual or Business Owner Membership:			\$ 140 per year □ cash or check \$ 145 per year if paid by credit card	
Member paying their own dues without reimbursement by employer. (It reduces your disposable income to pay this, includes business owners.) NOTE: non-profits and charities may join at this rate, even if reimbursed or paid by charity.				
Business Paid or Reimbursed Membership: \$190 per year $\Box$ cash or check \$195 per year if paid by credit card Member's dues paid by employer directly or employer is reimbursing them.				
(It does not reduce their disposable income to be a member.) Only the first representative must pay this higher rate! Any additional members from the same business & location may renew at \$140 each				
Non-Member or guest of RHABA member: \$15.00 per meeting				
<u>Please make checks payable to RHABA and mail with completed form to:</u> RHABA, PO Box 145, Rural Hall, NC 27045-0145 Questions? Please call Steve Hill at 336-969-9511				