



**MAKE CHECK OUT TO:
WIDOWED FRIENDS**

Widowed Friends Membership/Renewal Application

***** 2026 *****

New Member ☐

☐ Male

Renewal ☐

Annual dues of \$25 are renewable by Jan 31st each year.

☐ Female

Name (PRINT) _____ Phone _____

Address _____ Apt/Unit _____ City/Zip _____

E-mail Address (PRINT) _____

Make your check payable to Widowed Friends (our bank only accepts checks made out to **Widowed Friends**) AND SEND **your check** and this **ENTIRE PAGE** to the **address listed below:**

Widowed Friends

Michael A. Chekal, Treasurer,

29812 Fox Grove Road

Farmington Hills, Michigan 48334-1955

Call Elaine, Co-Leader/Membership Chairperson at 586-291-2471, if you have any questions.

You are responsible for your own safety. Participation in *WIDOWED FRIENDS* activities is at your own risk. Your insurance must cover any injuries, accidents, or mishaps.

Your Signature: _____ **Date:** _____

PLEASE SIGN & DATE

HAVE YOU RECEIVED A COPY OF THE NEWSLETTER?

YES, I HAVE RECEIVED THE NEWSLETTER, _____

NO, I HAVE NOT RECEIVED THE NEWSLETTER, _____

What types of activities are you interested in? Dancing? Bowling? Golf? Book Club? Meals – which ones? Trivia Nights? Bingo? Day Trips – Where would you like to go? Help with the Masses? Helping with the newsletter? Would you be willing to Host an Event? Do you have computer skills? Would you be willing to help the Event Host? Please share your interests with us!! (If you run out of space, please continue on the other side.)

