



Volunteer/Member Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

(due to the increased cost of postage, EYS would like to use email as much as possible for all communications)

Please indicate how EYS can best get in touch with you:

- Phone # _____ Cell Phone # _____
- Email _____ Mail (to address above)

Please sign me up for the following committees:

- | | |
|--|---|
| <input type="checkbox"/> Fundraising Committee | <input type="checkbox"/> Membership Committee |
| <input type="checkbox"/> Events Committee | <input type="checkbox"/> Fashion Show/Silent Auction |
| <input type="checkbox"/> Merchandise Committee | <input type="checkbox"/> Support Committee |
| <input type="checkbox"/> Education Committee | <input type="checkbox"/> I do not wish to work on any Committee |

Become a Member, Join Now!

Membership Dues: \$20.00

Please return this form with your check (made payable to Embrace Your Sisters) to:

**Embrace Your Sisters
PO Box 322
Canandaigua, NY 14424**

Your Membership Includes:

*Attendance to all Member meetings and voting rights
EYS merchandise at reduced cost
The opportunity to help those faced with a diagnosis of breast cancer*

Questions? 585-624-9690

Embrace Your Sisters is an organization that financially assists people diagnosed with breast cancer in Ontario, Monroe, Livingston, Steuben, Yates, Seneca and Wayne counties. With your help, we will be able to continue our fight and help those in need.

www.embraceyoursisters.org