

Membership Information (Please fill in ALL lines below)

Name: _____

Title: _____

Organization: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Name for tag: _____

Spouse's Name: _____

Type of Membership: Bank: _____ *All financial institutions: Banks, Thrifts & Credit Unions*
(Please Check One)

Affiliate: _____ *All industry-affiliated companies: Non Bank, Thrift or Credit Union*

Member of National FMS: Yes _____ No _____

2009 - 2010 Local Chapter Membership Dues

Bank: _____ \$ 70.00

Affiliate (See Desc): _____ \$100.00

Your prompt attention to this renewal notice is most appreciated. Please update all information requested above. Return this form in the enclosed envelope, along with your check payable to the Financial Managers Society, Philadelphia Chapter or mail/fax to: Eric Golden c/o Abington Bank, 180 Old York Road Jenkintown, PA 19046, (215) 887-4100 (fax). You may also e-mail your information to eric.golden@abingtonbank.com.