

Metropolitan Interfaith Council on Affordable Housing Membership Form

Please return form to MICAH
463 Maria Avenue
St. Paul, MN 55106-4428
MICAH.org

Congregation or Organization: _____

Clergy or Director: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Web Site Address: _____

Membership:

____ **Basic** (\$125 annual fee)

____ **Contributing** (\$250 annual fee)

____ **Supporting** (\$500 annual fee)

____ **Sustaining** (\$1,000 annual fee)

Suggested Contributions:

Contribution guidelines for annual dues are based on the annual budget of your congregation or organization:

Under \$250,000	\$125
\$250,000 - \$500,000	\$250
\$500,000 - \$1,000,000	\$500
\$1,000,000 and above	\$1,000

Amount Enclosed: _____

Please indicate a key contact person for your congregation or organization.

Contact Person: _____

Home Address: _____

City: _____ Zip: _____

Day phone: _____ Evening phone: _____ Cell phone: _____

E-mail: _____