

# The Madison Society Foundation Membership Application

Date: \_\_\_\_\_

**Please choose one:**

\_\_\_\_ New Member

\_\_\_\_ Gift Membership

**Please choose one:**

\_\_\_\_ Family Lifetime Membership - \$30.00

**Please fill in ALL current information:**

Member Name \_\_\_\_\_

Street \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone(\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Additionally, I have included a donation for the MSF, National 2nd Amendment Litigation Fund.**

\_\_\_\_ \$5.00 \_\_\_\_ \$10.00 \_\_\_\_ \$25.00 \_\_\_\_ \$50.00 \_\_\_\_ \$100.00 \_\_\_\_ Other \_\_\_\_\_

If there is a specific lawsuit that you would like to donate to please visit us on [www.madison-society.org](http://www.madison-society.org)

**One person per application, please. Mail application with payment to:**

Madison Society Foundation, Inc./Membership  
P.O. Box 373  
Groveland, CA 95321

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