



FRANCISCAN FEDERATION
 CONGREGATIONAL MEMBERSHIP FORM
 January 1, 2017 – December 31, 2017

OFFICE USE ONLY:
 Date Rec'd: _____
 Amt: _____ Ck # _____
 Database Dues
 Directory Musings

Please print clearly:

Congregation _____

Address _____

Phone _____ Email _____ Website _____

Voting Member *(For present members)* _____

Number of Vowed Members _____ Number of Associates/Cojourners _____

Date of next Provincial Chapter _____, _____, _____
 Month Day(s) Year

Date of next General Chapter _____, _____, _____
 Month Day(s) Year

If you have a new Leadership Team/Council or Coordinator of Vocation, Formation, Associate Program or JPIC, please provide their names and emails for Musings. If you are joining the Federation for the first time, please add a list of your leadership team and Coordinators of Vocation, Formation, Associate Program or JPIC.

DUES: Please indicate (✓) choice of payment:

Full payment _____
 Two equal payments paid in full by March 30th _____

Membership fee: \$20.00 per member X number of members _____ = _____

Exceptions:

Congregation/Provinces with 1 – 50 members	\$600 (minimum amount)
Generalates (in the United States)	\$200

AMOUNT ENCLOSED _____

(If the amount enclosed differs from the MEMBERSHIP FEE please attach a letter of explanation.)

For questions or further information email: franfedoffice@franfed.org; phone : 718-858-8819

 SIGNATURE OF PERSON COMPLETING FORM DATE

**Return form and information to: Franciscan Federation National Office
 Congregation Membership
 135 Remsen Street
 Brooklyn NY 11201**