**YEDA Non-Competing Membership Form**

**2023-2024**

*All completed transactions will be processed*

*in the order in which they are received.*

***Please allow fifteen business days for processing***

*Examples of Non-Competing Membership:*

*Seniors who are not showing but applying for membership to be eligible for the Scholarship Incentive Fund (SIF).*

**Payment of $70 fee and must be accompanied with this form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name:** |  | | | | |
| **Address:** |  | | | | |
| Street Address City State Zip | | | | |
| **Phone Number:** |  | | **Email:** | |  |
| **Emergency Contact** |  | | **PH:** |  | |
| **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Make Checks out to: YEDA**  **Mail Form to:**  Debbie Arnold  2415 State Route 603  Ashland, OH 44805 | | **For Questions Contact Debbie Arnold (CFO)**  **Phone:** 419 – 566 – 6589  **Email:** DArnold@showyeda.com | | | |