



# Newcomers & Neighbors of Barrington

## Membership Form

Date \_\_\_\_\_

Your name \_\_\_\_\_ Spouse's name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Names(s) of child(ren)	Age	Names(s) of child(ren)	Age
_____	_____	_____	_____
_____	_____	_____	_____

	Yes	No
1. Would you be interested in hosting an event in your home?	<input type="checkbox"/>	<input type="checkbox"/>
2. Would you be interested in contributing a hospitality meal for a Newcomer family with a new baby or other need?	<input type="checkbox"/>	<input type="checkbox"/>
3. Would you like to be listed in our annual directory (information includes names, address, phone number, ages of children)	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have a teenager who is interested in babysitting for other members?	<input type="checkbox"/>	<input type="checkbox"/>

If you are new member, how did you hear about us? \_\_\_\_\_

Please return with **\$35 annual membership dues** (check to Barrington Newcomers & Neighbors):

Membership  
 Barrington Newcomers & Neighbors  
 P.O. Box 310  
 Barrington, RI 02806