

**ANNUAL DUES OF THE MASTOCYTOSIS SOCIETY
ARE \$35**

**PAYMENT MAY BE MADE BY CHECK TO:
THE MASTOCYTOSIS SOCIETY
PO Box 511
PLAINVILLE, CT 06062**

**OR THROUGH www.paypal.com DIRECTED TO:
regina.rentz@comcast.net**

**IF YOU ARE UNABLE TO AFFORD TO PAY DUES AT THIS TIME,
DUES MAY BE WAIVED BY THE BOARD OF DIRECTORS. A
REQUEST FOR WAIVER CAN BE MADE TO ANY BOARD MEMBER.**

PLEASE INCLUDE THE FOLLOWING INFORMATION:

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

COUNTRY (IF NOT US) _____

PHONE _____

EMAIL _____

PATIENT'S NAME (IF DIFFERENT) _____

CHILD? YES NO

**CONTRIBUTION TO THE ANGEL FUND (TO PAY DUES FOR A MEMBER
UNABLE TO DO SO)**

**THE MASTOCYTOSIS SOCIETY DOES NOT RELEASE ANY
INFORMATION ABOUT OUR MEMBERSHIP.**