

Please print this page and mail the completed form along with a check to:

Maryland Breastfeeding Coalition
P.O. Box 41
Brooklandville, MD 21022

Name: _____

Credentials: _____

Organizational Affiliation: _____

Mailing Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

How did you hear about us: _____

Membership Level:

_____ Individual: \$25

_____ Organization: Recommended donation

_____ \$50 for non-profit

_____ \$100 for-profit organization or business

Make checks payable to “Maryland Breastfeeding Coalition”

The Maryland Breastfeeding coalition, Inc., is an IRS Section 501(c)3 non-profit organization. Charitable contributions, donations, and gifts to the Coalition are tax-deductible. Please check with your tax advisor to verify your individual situation.

Please note that membership is annual. Our fiscal year runs from May 1st to April 30th.

