



# 2019 KFDA Supporter Application

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

Do you want the KFDA Journal sent by:  E-mail  Mail  Both

<b>Thank you for supporting the association!</b>	KFDA Supporter Fee	\$ <u>150.00</u>
Supporters receive KFDA mailings including:	KFDA PAC Donation	\$ _____
KFDA Journal	Kansas Funeral Directors	
Death Notices <i>(Email only)</i>	Foundation Scholarship Donation	\$ _____
District Meeting Notices	<i>(Tax deductible as charitable contribution)</i>	
Convention Mailing		
Continuing Education Information	<b>Total KFDA Dues.....</b>	<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>

***Please make check payable to KFDA, and mail to 1200 S. Kansas Ave., Topeka, KS 66612-1375***

Our firm understands that by providing our mailing address, email address, telephone number and fax number, we consent to receive communications sent by or on behalf of KFDA.

Please check only if you do **not** wish to receive communications sent by or on behalf of KFDA via: Fax

\_\_\_\_\_

Supporter Signature

\_\_\_\_\_

Date