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Proudly Serving Charitable Gambling Organizations Throughout Minnesota

2017 ACM Associate Membership Form

Dues: \$300

New Renewal

Check Enclosed \$300 \$500* \$750* Other*

Contact Person: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____ - _____

Phone Number: (____) _____ Toll-free: (800) _____

E-mail Contact: _____@_____

Manufacturer Distributor Accounting Other

Membership Year: **Renewals - 12 months** from expiration date of 2017 membership.

New - 12 months starting with postmark month on return envelope with form & dues.

To ensure proper credit you must completely fill out the registration form above and mail to:

Allied Charities of Minnesota (ACM)
3250 Rice St
Saint Paul MN 55126-3080

*2017 dues plus additional contribution.