

# ***Michiana Parents of Multiples Club***

## ***Membership Form***

*P.O. Box 11173, South Bend, IN 46634-0174*

Dues are \$25, payable to MPOMC. Dues include our monthly *Twin Crier* newsletter. A portion of your dues goes toward membership in the National Organization of Mothers of Twins Clubs, Inc. and the Indiana Federation of Mothers of Twins Clubs.

Please print all information as you wish it to appear in the club directory.

Are you a new or continuing member? (Circle one) New    Continuing

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

Your birth date: \_\_\_\_\_ Spouse's birth date: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

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

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

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

Are you expecting?    Yes    No    If yes, when is your due date? \_\_\_\_\_

Type of multiples:    IB    FB    IG    FG    B/G    Triplets    Quads    Unknown/Other \_\_\_\_\_

Please complete this information for all of your children, in order of birth:

FIRST NAME	LAST NAME	MULTIPLE?	BIRTHDATE

*Thank you and welcome to the Michiana Parents of Multiples Club!*