

**HAIRSTON-GALLANT
MEMBERSHIP FORM
2014**

ANNUAL DUES - \$10.00 per Family Member

NAME: _____
LAST FIRST MI

ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____

Telephone Number (s): _____

Email (if applicable): _____

Amount Enclosed: \$ _____

Make checks or money order payable to:

Hairston Gallant Family Reunion

Mail payment to:

**Justin McGhee-Treasurer
1531 Rivermount Heights
Martinsville, Virginia 24112**

or

Pay on site at the reunion registration table.