



CAMBRIDGE NEIGHBORS

ARLINGTON BELMONT CAMBRIDGE SOMERVILLE WATERTOWN

Gateway Membership Renewal and Agreement Form 2024-2025

Thank you for renewing your membership with Cambridge Neighbors and for your participation in building a community known for life enrichment, generosity of spirit and mutual support of fellow members.

Renewal: Please print and sign your name to renew your membership

I/we renew my/our membership for another year with Cambridge Neighbors and agree that the membership is subject to the same terms and conditions as were set out in the membership agreement that I/we signed when I/we originally joined Cambridge Neighbors (formerly Cambridge at Home.)

Print Name

Signature

Date

Print Name

Signature

Date

Payment

GATEWAY MEMBERSHIP: \$550.00 single household dues \$700.00 dual household dues

GATEWAY + VOLUNTEER MEMBERSHIP: (40 hrs. of service/year): \$425.00 single household dues \$538.00 dual household dues

OPTIONAL TECH HELP ADD-ON: \$225.00

Organization cost-effectiveness is enhanced with payments by check. Make checks payable to Cambridge Neighbors.

Check enclosed

Please charge my credit card the FULL AMOUNT or Automatic Monthly Installments of: **\$47.00 single/\$60.00 couple***

Membership + Volunteer: **\$37.00 single/\$47.00 couple***
*Please make sure CN has an up-to-date card on file at all times.
For monthly payments that include tech help, please contact the office for prices.

PLEASE SEE CREDIT CARD RELEASE FORM INCLUDED

Tax Deductible Contribution

Membership dues cover 65% of Cambridge Neighbors' annual budget. Would you like to make a tax deductible contribution to help Cambridge Neighbors continue to be a self-sustaining nonprofit?

Yes, I want to help! **Donation amount \$** _____ Check enclosed Charge my credit card

Monthly Event Calendar & Quarterly Newsletter


We will mail you a paper copy of our monthly calendar. Would you also like a copy emailed to you?

No, paper only Yes email address: _____

Membership Directory

The CN Membership Directory will be distributed to CN members only. We will include your name, address, phone number and email address unless you indicate otherwise. Please do not include me in your directory.

For bookkeeping purposes, your renewal dates will show as the first day of the month closest to your initial date of membership.

Please turn over to complete the renewal form. 

OFFICE USE ONLY

Membership starts: _____ Membership Renewal Date: _____

CE QB ML Packet

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How did you originally hear about us? _____

Please tell us about your interests. This can help us in shaping our programming. _____

Current Emergency Contacts – *Please provide two contacts for the office or provide updated information for contacts previously provided at initial membership.*

1. Name: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

2. Name: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

If you have any questions, please call the office at **617-864-1715** or e-mail info@cambridgeneighbors.org. Please use the enclosed envelope and return your signed invoice and payment to:

Cambridge Neighbors

545 Concord Avenue, Suite 104

Cambridge, MA 02138

Thank you for renewing your membership!