Swedish Council of St. Louis 2023 Membership Form

www.swedishcouncilstlouis.org

Please submit this form along with applicable dues. Note: If you are not sure if you paid your dues, please email the council at **swedishcouncilofstlouis@gmail.com** and we can verify your status.

Mail to SCSL
Helén Wolf
2 Meadow Brooke Lane
Moscow Mills, MO 63362

Family	**$30.00**
Individual	**$20.00**

I would like to receive the SCSL newsletter **electronically only** _____ (requires e-mail. Will be in pdf format)

Last Name _____ First Name_____

Address_____

Address2_____ City_____ State_____ Zip_____

Phone:_____

E-mail Address_____

Spouse:
Last Name_____ First Name_____

Children under 21 with Ages:

_____ _____

_____ _____

If you are a new member, how did you hear about us?
___Website ___Friend ___Other (please specify) _____

I volunteer to work with...
(check your choices)

___Butik
___November Silent Auction
___Lucia
___Midsommar
___Christmas Party
___Scandinavian Picnic
___Crayfish Party
___Greeter at Events
___Children's Activities
___Potatiskorv Dinner
___Cooking (Events where we prepare our own main courses)
___Media Committee (Newsletter and website)

Please List any special talents or interests or you or your family members that you would be willing to share with the SCSL: