



# Seacoast Area Mothers of Multiples

Serving the New Hampshire Seacoast and York County, Maine since 1980

## Member Info Sheet

Today's Date: \_\_\_\_\_

Your Name: \_\_\_\_\_

Husband/Partner's Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Your Birthday (MM/DD): \_\_\_\_\_

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

Please check: I do do not prefer to receive club info via email and attachments  
I do do not prefer to receive club newsletters via email attachment

Names of Children	Sex	Birthdates/Due dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please describe what you would like to get out of this organization? How can we best meet your needs?

Do you have any suggestions for speakers and/or topics for our meetings?

Our Mother Mentor program provides one on one support and friendship to new moms and new members of our group. The mentor will be a mother from the membership...

Would you like a Mother Mentor? YES NO  
Would you like to be a Mentor (if your twins are over one year old)? YES NO

**To become a member, please send this completed form along with membership dues to SAMOM Club, PO Box 574, Greenland, NH 03840.**

**Thank you. We hope to see you at our next meeting, event or playdate!**