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**2026
MEMBERSHIP FORM**

Participation Levels: _____	President's Club	\$5,000.00
(Please check one) _____	Capitol Club Elite	\$3,000.00
_____	Capitol Club	\$1,250.00
_____	500 Club	\$500.00
_____	Dollar-a-Day Club	\$365.00
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I'd like to contribute to MedAC by check (circle one):

Please make your **CORPORATE** or **PERSONAL CHECK** payable to **MedAC** and send to MedAC, PO Box 8909, Trenton, NJ 08650.

I'd like to contribute to MedAC using a CREDIT CARD:

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Bill my credit card in monthly installments of \$110 per month (continuous) _____
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Please fill in the amount paid: _____

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*Please Note: We need the complete **BILLING ADDRESS** and **CVV CODE** to process.*

The New Jersey Election Law Enforcement Commission requires us to collect and report the name, mailing address, occupation, and name of employer of contributors whose contributions exceed \$300 in a calendar year.

Name: _____

Billing Address: _____

Phone: _____ E-mail: _____

Occupation: _____

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Work Address: _____

Street Address City State ZIP

If you are sending a check from a partnership entity or from a limited liability entity, please provide written instructions concerning the allocation of the contribution amount to a contributing partner(s) or member(s); a signed acknowledgment of the contribution from each contributing partner or member who has not signed the contribution check or other written instrument; and, contributor information for each contributing partner or member.

Contributions to MedAC are not deductible as charitable contributions for federal income tax purposes. Contributions are not limited to suggested amounts. MSNJ will not favor or disadvantage anyone based upon the amounts of or failure to make PAC contributions. Voluntary political contributions are subject to limitations of ELEC.