

Passport To Health Is Easy To Join!

You'll find that Passport To Health offers real value for your \$5 membership fee.

Join by filling out and returning the membership application below.



PASSPORT TO HEALTH ANNUAL MEMBERSHIP APPLICATION

Name: _____ Birthdate: _____

Spouse's Name (if both will join): _____ Birthdate: _____

Address: _____ Email: _____

City: _____ N.C. ZIP: _____ Phone: _____

Membership Fee: \$5 \$10 for a married couple *Please allow 4 – 6 weeks for processing.*

Mail your application and check or money order to:

Passport To Health
Cape Fear Valley Health System
P.O. Box 2000
Fayetteville, NC 28302-2000