



Michigan Dairy Queen Operators Association  
Membership Form, Year 2017  
**Annual Dues \$50 Per Store**

Make check payable to: MDQOA

Mail to: MDQOA  
400 Lakeside Drive  
Waterford, MI 48328

Store # \_\_\_\_\_

Owners Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

Street

City

State

Zip

Store Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

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

Mailing Address (If Different From Store)

Street

City

State

Zip

Please fill out all information so we can update our records. If you have more than one store please add additional stores information and numbers to back of this form. **Please note: It is \$50 per store.**

Date Paid: \_\_\_\_\_ Check # \_\_\_\_\_