



# Membership Application

Name \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone (Night) \_\_\_\_\_ Phone (Day) \_\_\_\_\_

Phone (Mobile) \_\_\_\_\_ FAX \_\_\_\_\_

E-mail Address \_\_\_\_\_

Referred By \_\_\_\_\_

## Dues:

<b>Donation</b>				\$ _____
<b>Students (18 yrs or younger)</b>	<b>\$10.00/yr</b>	x _____	=	\$ _____
<b>Senior Citizens (62+)</b>	<b>\$10.00/yr</b>	x _____	=	\$ _____
<b>Individual</b>	<b>\$15.00/yr</b>	x _____	=	\$ _____
<b>Family</b>	<b>\$20.00/yr</b>	x _____	=	\$ _____
<b>Clubs / Organizations</b>	<b>\$100.00/yr</b>		=	\$ _____
<b>Life – Individual</b>	<b>\$150.00</b>	x _____	=	\$ _____
<b>Corporate</b>	<b>\$250.00</b>		=	\$ _____
<b>Benefactor</b>	<b>\$500.00</b>		=	\$ _____
<b>TOTAL:</b>				\$ _____