



Membership Registration Form

Date:

Personal Information

Full Name:

Home Address:

City: State: ZIP:

Phone: E-mail:

Membership Type:

- | | | | |
|--|----------|------------------------------|----------------------------------|
| <input type="checkbox"/> Regular (17 and over) | \$30.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Family | \$50.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Youth (16 and under) | \$20.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Organizational | \$55.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Lifetime | \$300.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Lifetime (Family) | \$500.00 | <input type="checkbox"/> New | <input type="checkbox"/> Renewal |

Surnames & Locations: (Ex: "Henderson - Pine Bluff, AR")

I volunteer to help with [check all that apply]:

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Program Planning | <input type="checkbox"/> Social Media Advertising | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Journal Editing | <input type="checkbox"/> Technology & Support | <input type="checkbox"/> Outreach |