

Annual Membership Renewal and Payment Form

Please print this form, complete all sections in block capitals, and return it to the membership office.

1. Member Contact Information

First Name:

Last Name:

Membership Number (if known):

Street Address:

City, State, Zip Code:

Phone Number:

Email Address:

2. Membership Renewal Options

Please write "YES" next to your preferred annual membership tier:

Individual Membership (\$50.00):

Family Membership (\$85.00):

Sustaining Membership (\$150.00):

Student / Senior Membership (\$30.00):

3. Payment Method

Please indicate your payment method and fill out the corresponding details.

Option A: Credit Card Payment

Cardholder Name:

Credit Card Number:

Expiration Date (MM/YY):

Security Code (CVV):

Option B: Check Payment

Check Number (payable to "The Association"):

4. Authorization and Signature

By signing below, I authorize the renewal of my annual membership and the payment details provided above.

Authorized Signature (Sign after printing):

Date (MM/DD/YYYY):