

# American GO Association

P.O. Box 397 Old Chelsea Station New York, NY 10113



## Membership Application Form

Type of membership (Circle one)

Full Adult

1 yr \$30 2 yrs \$50 3 yrs \$75 4 yrs \$100 5 yrs \$125

Sponsor \$100 or more

Chapter \$35

Sustainer \$50-\$99

Youth (22 years old and under)

1 yr \$10 2 yrs \$20 3 yrs \$30 4 yrs \$40 5 yrs \$50

Life member \$1000

Youth-Time \$8/year (up to age 23)

Specify number of years (maximum cost of \$100) \_\_\_\_\_

AGA Number (If known) \_\_\_\_\_ AGA Chapter \_\_\_\_\_

Family Name \* \_\_\_\_\_ Given Name(s) \* \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \* \_\_\_\_\_ State \* \_\_\_\_\_ Zip \* \_\_\_\_\_

Citizen of \* \_\_\_\_\_

Phone \_\_\_\_\_ Email \* \_\_\_\_\_

Date of birth \_\_\_\_\_ (Required for Youth, Optional for Adult)

Occupation \_\_\_\_\_ Promotional code \_\_\_\_\_ (\* = required field)

\_\_\_\_ Check or money order enclosed (DO NOT SEND CASH)

\_\_\_\_ Please bill my \_\_ MC \_\_ Visa \_\_ Disc \_\_ Amex credit card Card #

# \_\_\_\_\_ Exp \_\_\_\_\_

Name/Billing Address of cardholder (if different) \_\_\_\_\_

Mail to: Sam Zimmerman, 925 Lindsay Lane, Lancaster, PA 17601-6622

THANKS!