

American GO Association

Membership Application Form

www.usgo.org



Type of membership (circle one)

Full Adult

1 yr \$30 2 yrs \$50 3 yrs \$75 4 yrs \$100 5 yrs \$125 Life member \$1000

Chapter 1 yr \$35 2 yrs \$70 Sponsor \$120 or more

Youth (22 years old and younger) Sustainer \$60-\$119

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

Youth-Time: one-time payment: membership all the way up to age 23—maximum cost of \$100

How many years _____ x \$8 = \$ _____ (if > \$100, pay only \$100)

Note: This category next renewal is at age 23 at the full adult rate (\$30 per year)

AGA Number (if known) _____ AGA Chapter _____

* Family Name ("Last" Name) _____

* Given Name(s) _____

* Address _____

* City _____ * State _____ * Zip _____

* Gender _____ * Citizen of _____

(These are required to determine eligibility for certain invitational events)

Phone _____ * Email _____

Date of birth _____ (*Required for Youth • Optional for Adult)

Occupation _____ Promotional code _____

Items marked with * are required.

Send with payment by check to:

Treasurer
American GO Association, Inc.
PO Box 3678
Gardena, CA 90247

THANK YOU for your support of American GO!