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)
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!