

# American GO Association

## Promotional Membership Application Form

[www.usgo.org](http://www.usgo.org)



**NOTE:** This is a **one-time opportunity** to join the AGA at half the usual rate for one or two years. This membership is available **ONLY** to **first-time members** of the AGA, and only through an **official AGA Chapter**. A Chapter Official must sign this application form.

Items marked with \* are required.

\* Family Name \_\_\_\_\_

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

\* Address \_\_\_\_\_  
\_\_\_\_\_

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

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

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

(These are required to ascertain eligibility for certain invitational events.)

Length of Membership (check one) :  One year (\$15)  Two years (\$30)

**Note: Renewal will be at the regular membership dues rate (currently \$30/year).**

\* Name of Sponsoring AGA Chapter \_\_\_\_\_

\* Chapter ID# \_\_\_\_\_

\* Title of Chapter Official \_\_\_\_\_

\* AGAID of Chapter Official \_\_\_\_\_

\* Printed Name of Chapter Official \_\_\_\_\_

\* Signature of Chapter Official \_\_\_\_\_

\* Date \_\_\_\_\_

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!