Shoreline Amateur Astronomical Association
HOLLAND, MICHIGAN
www.holland-saaa.org

MEMBERSHIP APPLICATION FORM

Please Print All Information Date: / /

Name:		
Street Address		
City / State / ZIP code		
Telephone No.(s)	Home:	Mobile:
Email Address:		
Family Membership:	❑ Yes ❑ No	
Please list additional names:	1. 2. 3. 4.	

Do you wish to receive email notifications for star parties and observing sessions? ❑ Yes ❑ No

Membership Dues:

Annual Family Membership [1] $25.00
Annual Junior/Senior Membership [2,3] $15.00

Notes:

1. Dues are prorated quarterly depending on when you join. That is, if you join in January-March, full fee; April-June = 75%; July-September = 50%; October-December = 25%.
2. Junior membership is applicable to high school or college students.
3. Senior membership is applicable to members over the age of 60.

Total Payment Enclosed:..... $ _____.____
I have paid on line: ..... $ _____.____

Please make your check payable to **Shoreline Amateur Astronomical Association**

Mail check with completed form to:

Shoreline Amateur Astronomical Association
SAAA
PO Box 1832
Holland, MI 49422-1832

"Serving the Holland Area Since 1989"