



MEMBERSHIP APPLICATION

Please fill out this form as completely as possible. Maintaining accurate information allows the Club to notify you of events and information that may be valuable to you. If any of this information changes, please submit a revised form as soon as possible. This will help keep the Club database current.

MEMBERSHIP TYPES **Full Membership**—\$60 annual dues *PLUS* a one-time initiation fee of \$100.
 Includes full use of SHGA facilities, *High Times* newsletter and voting privileges.
Associate Member—\$60 annual dues. Includes full use of SHGA facilities and newsletter.
Quarterly Membership (3 months)—\$40
Monthly Membership—\$25
Daily Membership—\$5

Membership is not valid unless this form is completed and payment is enclosed.

DATE _____ NEW MEMBER INFO UPDATE

TYPE OF MEMBERSHIP REQUESTED (circle one) Full Associate Quarterly Monthly Daily

USHGA NUMBER _____ USHGA EXPIRATION DATE _____

NAME _____ NICK NAME _____

ADDRESS _____

CITY: _____ STATE _____ ZIP _____

HOME PHONE (_____) _____ WORK PHONE (_____) _____

CELL PHONE (_____) _____ PAGER (_____) _____

E-MAIL _____

OCCUPATION _____ HAM CALL SIGN _____

EMERGENCY CONTACT _____ PHONE (_____) _____

TYPE (CIRCLE ONE)	HG	RATING (CIRCLE ONE)	I-BEG	II-NOV	III-INT	IV-ADV	V-MSTR	INSTRUCTOR
	PG	RATING (CIRCLE ONE)	I-BEG	II-NOV	III-INT	IV-ADV	V-MSTR	INSTRUCTOR

Application can be mailed, dropped in the payment tube in the LZ or given to the Site Monitor. Make checks payable to SHGA. Payment must be included with this application.

MAIL TO **SHGA**
 P.O. Box 922303
 Sylmar, CA 91392