

## Application for GHAAS Membership



Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Membership Application Fee (check one):

- Regular Membership: \$6.00
- Family Membership: \$9.00
- Associate Membership: \$3.00 (12 to 18 years of age)

The membership form requires nominating signatures of two Society members which can be obtained by attending a regular monthly meeting of the society. The nominating signatures can be made directly on the membership form or endorsements can be sent via email to any Society officer. The applicant shall attend at least two of three monthly meetings as an expression of his/her interest in the Society.

Nominating Member Signatures:

Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Check Here \_\_\_\_\_ if emails are being sent in lieu of signatures

Send Completed Application Form along with check to:

GHAAS  
P.O. BOX 1032  
CONYNGHAM, PA 18219