

San Antonio Astronomical Association

Membership Application

			Membership Types	
☐ New ☐ Renewal *Indicates a required field			☐ Individual (\$30)	
*Name:			☐ Student (\$15)	
*Address:			☐ Sustaining (Individual + \$30+)	
*City:		*State:	☐ Lifetime (\$400)	
			☐ Family up to 4 family members) (\$45)	
*Zip Code:	Phone:		Additional Family, under 18 (\$5)	
*Email:			Additional Family, 18+ (\$10)	
List additional I	,	and website and Yahoo Group		
				
☐ Do not publish my contact information				
members may be ad	ded for other household members a ey have all the benefits and rights or C	and carries the same benefits and rights	•	
☐ Sky & Telesco	ppe (\$43.95)	☐ Astronomy (\$34.00)	☐ Astronomical League (\$7.50, June only)	
Would you like to make a tax deductible donation to SAAA? \$ Check here if you wish areceipt mailed to you.				
Total Members	ship Fee (Membership + A	dditional Family Members +	Magazines + AL Dues + Donation)	
\$	_ Make checks payable to "San Antonio Astronomical Association"			
By-Laws. I also			I agree to abide by the Association's Constitution and hile at the SAAA Observing Site and at any Association	
Signatur	e:		Date:	

Mail application and check to: San Antonio Astronomical Association

Post Office Box 701261 San Antonio, Texas 78270-1261