



## MEMBERSHIP FORM

### Membership type (Mark Appropriate One)

- Individual - \$10.00
- Individual + Spouse - \$15
- Family - \$20.00
- Student or Senior Citizen - \$5.00
- Life member - \$100.00
- Donation \_\_\_\_\_

Member name: \_\_\_\_\_

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

\_\_\_\_\_

E-mail: \_\_\_\_\_

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

Other family members' name for family member only:

a. \_\_\_\_\_ (SPOUSE)

b. \_\_\_\_\_

c. \_\_\_\_\_

d. \_\_\_\_\_

e. \_\_\_\_\_

Member signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail the membership form to the ANS Treasurer at the address below:

ANS Treasurer  
P O Box 1718  
Centreville, VA 20122

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Official Use:

*Paid By:* Cash/ Pledge / Check # \_\_\_\_\_ *Receipt #* \_\_\_\_\_

*Received By:* \_\_\_\_\_ *Date:* \_\_\_\_\_