MEMBERSHIP RENEWAL 2018 - 2019

ANNUAL MEMBERSHIP DUES

☐ Individual $200 $ _____

☐ Couple $400 $ _____

BENEFACTOR INITIATIVE

☐ Benefactor

- 1 year $1,000
- 3 years $2,500
- 5 years $4,000 $_____

TOTAL ENCLOSED

(Renewal, Benefactor)

TOTAL $_____

PAYMENT INFORMATION

☐ Check Enclosed Amount $_____

Make checks payable to SASF

☐ Visa ☐ MC Amount $_____

Card # _____

Expiration Date _____ CVS _____

Billing Address _____

City_____State_____

Zip Code _____

Community (i.e. Pelican Landing)

_____

INDIVIDUAL & COUPLE NEW MEMBERSHIP

☐Mr. ☐Mrs. ☐Ms. ☐Dr. ☐Retired ☐Employed

Name_____

Company _____

Title _____

Florida Address _____

_____

City _____ State _____ Zip_____

Phone (_____)_____

Cell (_____)_____

Email_____

Second Member's Name

_____

What topics are you interested in?

_____

_____

MAIL TO:

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P.O. Box 367886
Bonita Springs, FL 34136 – 7668

Please direct any questions to:
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Email: speakersassembly@aol.com
www.SpeakersAssembly.com