

**2023 Membership Application**

**New Member ( )** **Renewal ( )**

Please **PRINT**:

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

**Last First**

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

**City, State, ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: Area Code & Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check one or more as applicable:**

\_\_\_\_\_Yearly Membership, Individual $40.00

\_\_\_\_\_Yearly Membership, Family $45.00

\_\_\_\_\_Donation Amount $\_\_\_\_\_\_\_\_\_\_\_\_ SGES is a non-profit 501 (c)(3) corporation and is tax deductible. Consult your accountant for tax rulings.

**Payment:**

Amount Received: $ \_\_\_\_\_\_\_\_\_\_ Method: Check# \_\_\_\_\_\_\_; Cash \_\_\_\_\_\_\_; PayPal \_\_\_\_\_\_\_

Make check payable to SGES, Inc., P.O. Box 7728, Jacksonville, FL 32238-7728

or apply online at our website www.sgesjax.org and pay with PayPal.

Your membership includes the use of our library and monthly meetings which feature a wide variety of programs that are posted on our website plus membership email reminders.

**Office Use Only**

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| --- | --- |
| Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Posted to Computer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Worksheet: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| New Member Letter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Mailing Label: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |