

Manasota ASALH, Inc. Membership Application

Please Print

Please complete this application and return it with your check to the following address: P.O. Box 2356 Sarasota, Florida 34230 US

Checks are payable to I	Manasota ASALH, Inc.			
Date	New Membership	■Renewal Me	embership:	
Name:				
Title (Abbr.):	Prefix: 🗖 Suf	ffix:		
Address:				
City: State:			Zip Code:	
Telephone: ()		Cellphone: ()	
Birth Month:	Email Addr	ess:		
Journal of African America Electronic (online):	an History viewing prefere Paper Back Copy	_		
Please check the appropri	ate category:			
Corporate Membe		\$2,	510.00	
Institutional Membership			\$	360.00
	mbershipnuous annual installments			
	hip (under 65 years old) Il dues (\$95) and Local dues		\$	135.00*
Senior Membership (65 and older)			\$	105.00*
 National dues (\$65) and Local dues (\$40) Dual Membership (occupants in same household) 			\$	200.00*
Dual Memb Name (inclu	pership info ude prefix & suffix):			
	Cell phone: (_			
Rirth month	n. (proceed to page	ze 2)		

Membership data must be submitted by each branch to National by mid-January. Manasota ASALH, Inc. is a 501©3 non-profit. Contributions are tax deductible.

ASALH MEMBERSHIP APPLICATION

Associate Membership	\$ 115.00
(This member has their primary membership with another ASALH Branch,	
National dues (\$75) and Local dues (\$40))	
Student Membership	\$ 65.00
National dues (\$55) and Local dues (\$10)	
Annual Individual Lifetime Membership	\$40.00
*Member receives quarterly issues of <i>The Journal of African American History</i> , the annual <i>Bulletin, and an online Manasota ASALH Membership Directory</i> .	issue of the <i>Black History</i>
What are your skills/talents?:	
What are your Dual Member's skills/talents?:	

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