



MEMBERSHIP APPLICATION

Membership Year October 1 to September 20

New () Renewal ()

Name _____ Name _____

Address _____ Changed Yes or No

City _____ State _____ Zip _____

Phone _____ Email _____

() Please check here if you do not wish the above information to appear on the Internet

*Signature _____

*Signature _____

*To authorize assignment of names to Great Lakes Region for representation at the BOD meetings

() Family- \$27.00

Full Voting member. Two Family members 10 or older, one of whom is the head of the household. Consists of 2 regular memberships and unlimited youth memberships.

Youth Names _____

() Regular- \$14.00

Full Voting member. No regular memberships will be issued to anyone under 18.

() Associate- \$12.00

A non-voting member enjoying all association benefits.

() Youth- \$12.00

A non-voting member under the age of 18 enjoying all association benefits

Make Check Payable to GLPFHA

Send to Kathy Pfister 4098 Groveland

Ortonville, MI 48462