



# Membership Form

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

(circle one) New / Renewal      If renewing, please update changed contact info.

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

AIM: \_\_\_\_\_ MSN: \_\_\_\_\_

ICQ: \_\_\_\_\_ Yahoo!: \_\_\_\_\_

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

If you do not have e-mail, we will send you written instructions on using your membership off-line. Small additional fees for voting via paper ballot instead of online may apply. If you do not have access to the Internet, you do not need to set a password.

Password: \_\_\_\_\_

*Your membership comes with a web based account that you can use to check your membership information and to vote for board members. New members need to select a password for this account. It should be between 8 and 16 characters long and contain both numbers and letters.*

## Membership type:

- |   |   |
|---|---|
| <input type="checkbox"/> Student (\$10/year)            | <input type="checkbox"/> Faculty or professional university staff (\$25/year) |
| <input type="checkbox"/> Non-student (\$35/year)        | <input type="checkbox"/> First Year Alumni (\$5/first year)                   |
| <input type="checkbox"/> Supporting member (\$100/year) | <input type="checkbox"/> Sustaining member (\$250/year)                       |
| <input type="checkbox"/> Silver sponsor (\$500/year)    | <input type="checkbox"/> Platinum sponsor (\$1000/year)                       |
| <input type="checkbox"/> Lifetime membership (\$1000)   | <input type="checkbox"/> Low-income membership (\$10)                         |

For joint memberships fill out TWO forms and include them in the same envelope. The fee indicated is the total fee for the joint membership.

Joint student (\$15/year)     Joint non-student (\$50/year)

Additional donation: \_\_\_\_\_

Total (membership + donation): \_\_\_\_\_

Please do not trade my contact information with other organizations (we never sell)

*Make checks payable to "Secular Student Alliance" or pay by Visa/MasterCard:*

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Secular Student Alliance  
P.O. Box 2371  
Columbus, OH 43216

Fax/Voice Mail: 1-877-842-9474  
ssa@secularstudents.org

*The SSA is a 501(c)(3) educational non-profit and all dues are tax deductible.*