

PSRDF MEMBERSHIP APPLICATION

ANNUAL MEMBERSHIP \$ 1.00

NEW LIFE MEMBERSHIP \$ 20.00

Due by January 1st

AREA FEDERATION _____

DATE _____

CLUB _____

PHONE _____

SUBMITTED BY _____

EMAIL _____

ALSO, PLEASE LIST ALL KNOWN PRESENT LIFE MEMBERS AND INDICATE IF INACTIVE

BLUE MEMBERSHIP CARDS YES ____ NO ____

	LAST NAME	FIRST NAME	ADDRESS	CITY	STATE	ZIP	PHONE	AMOUNT
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Please use as many sheets as necessary. Sheets may be photocopied.

Please make checks payable to PSRDF

Please send **applications to the membership chairman**, and checks to the state treasurer. You can find the updated information for each on the PSRDF officers page, under the information tab.