

MEMBERSHIP RENEWAL FORM

Please help us to keep your information current.

Name(s): _____

Address: _____

City _____

State _____

ZIP _____

Telephone (Home): _____

Telephone (Work): _____

E-Mail Address: _____

Please add me to the e-mail Announce List (circle one): YES/ NO

Web Site Address: _____

I may be interested in serving on a committee or helping out in other ways - please call me.

I have ideas for future programs at HAC: _____

I think the board should consider this: _____

I have other comments and suggestions: _____

Enclosed are my (our) dues in the amount of \$_____

Instead of dues, here is a donation to keep the newsletter and mailings coming \$_____

Please accept my gift in the amount of \$_____

Dues

Adult \$35

Family \$50

Newsletter Only \$10

In cases of hardship, the Association may waive the membership fee.

The membership year runs from 1/1 to 12/31.

Please mail checks payable to the Humanist Association of Connecticut to:

Humanist Association of Connecticut

Dr. David Schafer

27 Thornton St.

Hamden, CT 06517

If you have any questions, please call (203) 281-6232.