

St. Simons African American Heritage Coalition, Inc.

MEMBERSHIP APPLICATION

Name: _____ Date: _____

Street: _____ Phone No.: _____

City: _____ Zip Code: _____

E-mail Address: _____

Annual Membership Fees

____ Associate (\$25.00)
____ Individual (\$35.00)
____ Family (\$50.00)
____ Lifetime (\$500.00)



A 501©3 non-profit organization

Annual Business Membership Fees

____ Owners & Employees 1 - 10 (\$100.00)
____ " " 11 - 20 (\$125.00)
____ " " 21 - 30 (\$175.00)
____ " " 31 - 40 (\$225.00)
____ " " 41 - 50 (\$350.00)
____ " " 51 & Up (\$500.00)

Annual Organization (non-profit) Membership \$40.00

Please circle the area where you would like to volunteer.

Membership

Publicity

Fundraising

Property Issues

Preservation

For more info contact us;
(912) 634-0330

Make check payable to: SSAACH

RETURN TO: SSAAHC, P.O. BOX 20145, ST. SIMONS ISLAND, GA 31522

MA-06/10